



North Riding of Yorkshire County Council



ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER
OF HEALTH


FOR THE YEAR

1957

ERRATA.

Report of the County Medical Officer, 1957.

- PAGE 10. Extract from Vital Statistics, line 6—amend death rate “ 25·6 ” to read “ 26·6.”
- PAGE 11. “ Stillbirths ” line 4—amend “ 25·78 in 1957 ” to read “ 25·13 in 1957.”
- PAGE 23. First paragraph, last line—after words “ private practice ” add “ has been stopped.”
- PAGE 42. Second paragraph, line 3—last word—amend “ was ” to read “ were.”
- PAGE 45. Third paragraph, fourth line—amend “ national ” to read “ natural.”
- PAGE 47. Last column of graph insert “ 491.”
- PAGE 63. Under column “ Deaths under 1 year ” opposite “ No. 20 Whitley R.D.” amend “ 1 ” to read “ 4 ”
- PAGE 67. Under column “ All tuberculosis—primary notifications ” opposite “ No. 17 Stokesley R.D.” amend “ 7 ” to read “ 8.”
- Under column “ Other tuberculosis—notification rate ” opposite “ Total Rural ” amend “ 250·0 ” to read “ 233 3.”
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PREFACE

To the Members of the County Council of the North Riding of Yorkshire.

Mr. Chairman, My Lord, Ladies and Gentlemen,

I have pleasure in submitting my report for the year 1957, and regret that its presentation has been delayed by various factors. It primarily concerns the work of the Medical Department *vis-a-vis* the Health Committee. A separate report is presented each year to the Education Committee on the work of the school health service but points relating to the co-ordination of services in the medical field are mentioned in this report. The names of members of the Health Committee and its functions are set out in the Year Book for members : the members and duties of area sub-committees also appear there.

The tables at the end of the printed text in this report are compiled in accordance with the relevant Circular and the comments touch on subjects on which the Ministry of Health desires to have information.

The year 1957 saw a rapid extension in the campaign to protect children against poliomyelitis ; a high acceptance rate had been secured in the previous year by means of an individual letter sent to the parents of every child who was then eligible under the scheme announced on television by the then Minister.

The volume of work during 1957 in the field of immunisation against various diseases was very considerable and it necessitated postponing other activities from time to time—often at short notice—so that the perishable vaccine could be administered to those eligible. Refrigerators had to be provided in all area offices ; the distribution of poliomyelitis vaccine will remain a problem until a safe antigen, stable at ordinary temperatures, can be made available for use.

As regards sanitary matters, only major alterations or changes have been noted in this report because in 1954 and again in 1956, very lengthy details were given regarding the progress in the provision of rural water supplies and the improvements regarding sewage disposal in the rural areas. If any member of the council desires details of progress in individual schemes, the appropriate information will be made available on request.

The incidence of cancer remains high, but in looking at the number of deaths from this disease it must be remembered many more people are living to an age when the risk of malignant disease is greatest. The organisation of cancer research is proceeding, but up to now there has been no "break through" into the ultimate cause. It has been clear for years, however, that various irritants act as predisposing factors but it is difficult to persuade most people to stop the use of open coal fires and of tobacco. The position about cigarette smoking is well known, but is insufficiently stressed to the youth of the country before the habit is acquired.

In conclusion I wish to thank members of the Health Committee for their continuing support and my colleagues in the other departments at County Hall for their co-operation. To the staff in the central office and to the other staff employed all over the Riding, I extend my best thanks, for without their loyal support the routine work of the health department in the field of prevention and early treatment of disease would have been impossible.

I remain,

Mr. Chairman, My Lord, Ladies and Gentlemen,

Your obedient servant,

J. A. FRASER,
County Medical Officer.

County Hall,
Northallerton.



NORTH RIDING OF YORKSHIRE COUNTY COUNCIL.

ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER
OF HEALTH

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

STAFF OF COUNTY HEALTH DEPARTMENT (at 31/12/57).

County Medical Officer of Health	..	J. A. Fraser, M.B., Ch.B., D.P.H.
Deputy County Medical Officer of Health		J. T. A. George, M.D., Ch.B., D.P.H.
Medical Officer for Maternity and Child Welfare	}	Marjorie J. M. Dow, M.B., Ch.B., D.P.H.
Assistant Medical Officer—Mobile Maternity & Child Welfare Unit	}	Mary G. McDonald, M.B., Ch.B., D.P.H.
Chief Dental Officer	..	I. J. Faulds, L.D.S.
District Medical Officers of Health	..	See Table on pages 7 and 8.
Chest Physicians	..	V. Ryan, M.D., B.A.O., D.P.H.
(All part-time, in direct contract with Leeds or Newcastle-upon-Tyne Regional Hospital Boards)		G. Walker, M.B., M.R.C.P.(E), D.P.H. R. B. N. Wilsdon, M.D., M.R.C.P. S. P. Wilson, M.D., M.Sc., D.P.H. Kathleen M. Barran, M.B. W. Davidson, M.B.E., M.B., D.P.H. D. P. Degenhardt, M.D., M.R.C.P.
Superintendent Nursing Officer	..	Frances S. Leader, S.R.N., S.C.M., H.V.CERT.
Deputy Superintendent Nursing Officer	..	Lilian Mann, S.R.N., S.C.M., H.V.CERT.
Chief County Health Inspector	..	G. D. Aspin, C.S.I.B., A.F.S.(E).
County Health Inspectors	..	D. Nurse, M.R.S.I. R. Wharin, M.S.I.A.
Chief Clerk	..	H. A. Roebuck, D.P.A.
County Ambulance Officer	..	M. F. Smith
Senior Sectional Clerks	..	T. A. Hutchinson. Margaret Blair, D.P.A. A. R. Elliott. W. E. Lloyd. C. Rutherford.

Area and estimated mid-1957 Population	County Districts	Assistant County Medical Officer	Medical Officer of Health for Sanitary Services
Thornaby (43,570)	Thornaby Borough Stokesley R.D.	J. McGovern, M.B., Ch.B. D.P.H., Area Health Office, Francis Street, Thornaby-on-Tees.	J. McGovern.
Eston .. (34,890)	Eston U.D. ..	J. A. Dunlop, M.B., Ch.B., D.P.H., Health Office, Cleveland House, Grangetown, Middlesbrough.	J. A. Dunlop.
Redcar .. (37,880)	Redcar Borough Saltburn & Marske U.D.	H. Pattinson, M.B., Ch.B., D.P.H., Area Health Office, "Teeswold," Coatham Road, Redcar.	H. Pattinson.
Guis- borough (30,100)	Guisborough U.D. Loftus U.D. Skelton & Brotton U.D.	W. H. Butcher, V.R.D., M.A., D.M., D.P.H., Area Health Office, Park Lane, Guisborough	W. H. Butcher.
Whitby .. (23,120)	Whitby U.D. .. Whitby R.D.	B. Schroeder, M.B., Ch.B., D.P.H. Area Health Office Grape Lane, Whitby.	B. Schroeder.
Ryedale .. (29,290)	Malton U.D. Malton R.D. Pickering U.D. Pickering R.D. Helmsley R.D. Kirbymoorside R.D.	W. R. M. Couper, M.B., Ch.B., D.P.H., Area Health Office, Train Lane, Pickering.	W. R. M. Couper.
Bulmer .. (52,500)	Easingwold R.D. Flaxton R.D. Wath R.D.	H. Gray, M.D., Ch.B., D.P.H., Area Health Office, Manor Road, Easingwold.	H. Gray.
	Thirsk R.D. ..		*W. G. MacArthur, M.B., 144, Front Street, Sowerby, Thirsk.

Area and estimated mid-1957 population	County Districts	Assistant County Medical Officer	Medical Officer of Health for Sanitary Services
Wensley- dale (34,580)	Northallerton U.D. Northallerton R.D. Aysgarth R.D. Leyburn R.D. Masham R.D.	J. L. Cotton, M.B., Ch.B., D.P.H., Area Health Office, Leyburn.	J. L. Cotton.
	Bedale R.D.		*A. W. Hansell, M.B., Woodrow, Bedale.
Richmond (43,060)	Richmond Borough Richmond R.D. Croft R.D. Startforth R.D.	F. W. Gavin, M.D., Ch.B., D.P.H., Area Health Office, Quaker Lane, Richmond	F. W. Gavin.
	Reeth R.D.		*W. C. Spiers, M.B., Langhorne House, Reeth, Richmond.
Scar- borough (57,610)	Scarborough Borough Scalby U.D. Scarborough R.D.	W. G. Evans, M.B., B.Chir., D.P.H., Area Health Office, King Street, Scarborough	W. G. Evans, (also Divisional School Medical Officer) Elizabeth R. Cameron, M.B., Ch.B., D.P.H., Deputy M.O.H., Borough of Scarborough

*The above officers are not debarred by their terms of appointment from private medical practice.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.
GENERAL STATISTICS.

Area (in acres)	..	..	..	..	..	1,354,657
Number of separate private dwellings occupied (Census 1951)						99,836
Number of private households (1951)	..	..	..	..	..	102,704
Average number of persons per house (1951)	..	..	..	..	..	3.37
Population (Census 1931)						
Urban Districts	182,279	—				
Rural Districts	148,822	—	..	..	..	331,101
Population (Census 1951)	..					
Urban Districts	204,416	—				
Rural Districts	173,793	—	..	..	..	378,209
Population (estimated to mid year 1957)						
Urban Districts	208,800	—				
Rural Districts	177,800	..	..	..	..	386,600
Rateable Value (1st April, 1958)	..	..	..	..	..	£4,179,143
Estimated product of a penny rate	..	..	..	..	..	£16,652

Area.

The North Riding of Yorkshire is the third county in order of size in England, its acreage being 1,354,657. Its geographical character varies from the populous industrial district adjacent to the County Borough of Middlesbrough to the sparsely populated dales and moorland districts ; there are also smaller aggregations of population in inland districts and on the seaboard which forms the eastern boundary of the Riding : north of York too, there are heavily populated parishes in the Flaxton Rural District.

The administrative county includes four municipal boroughs (Redcar, Richmond, Scarborough and Thornaby-on-Tees), ten urban districts and twenty rural districts.

In nearly its whole length, the northern boundary is formed by the river Tees, separating the Riding from the County of Durham ; the eastern boundary is the seaboard ; on its southern boundary the Riding abuts on the East and West Ridings and the City of York ; on its western side is the Pennine Chain and the Lake District. Running almost north and south from Cleveland to the Vale of York is a range of hills known in its first portion as the Cleveland Hills and merging into the Hambleton Hills. In the western portion there are three main dales—these are Teesdale, Swaledale and Wensleydale proceeding from north to south.

Population.

The population as estimated by the Registrar General at mid-year 1957, is set out in the table below ; the population for the years 1931, 1938, 1953, 1954, 1955 and 1956 are also shown for comparative purposes :—

Year.			Urban Population	Rural Population	Total
1931	..	..	182,279	148,822	331,101
1938	..	..	186,000	147,500	333,500
1953	..	..	204,940	173,260	378,200
1954	..	..	205,800	175,700	381,500
1955	..	..	206,700	177,300	384,000
1956	..	..	207,900	179,100	387,000
1957	..	..	208,800	177,800	386,600

Social Conditions and Occupations.

The main industries in the north-eastern part of the Riding are the manufacture of steel and heavy chemicals : the latter industry is being rapidly developed. On the seaboard there are many holiday resorts ; and in the rural districts agriculture and allied industries provide employment for many.

Extracts from Vital Statistics of the Year.

		Total	M	F	
Live Births	Legitimate	6,121	3,178	2,943	{ Birth rate per 1,000 of the estimated home population 16·6
	Illegitimate	279	143	136	
Still births	..	165	86	79	Rate per 1,000 total (live and still) births 25·13.
Deaths	..	4,358	2,251	2,107	Death rate per 1,000 of the estimated home population 11·3.
				Deaths	Rate per 1,000 total (live and still) births
Deaths from pregnancy, childbirth, abortion				3	·46
Death rate of infants under 1 year of age :					
All infants per 1,000 live births				..	25·6
Legitimate infants per 1,000 legitimate live births				..	25·5
Illegitimate infants per 1,000 illegitimate live births				..	50·2
Deaths from measles (all ages)				..	2
Deaths from whooping cough (all ages)				..	nil

Live Births and Birth Rates.

During the year ended 31st December, 1957, the live births registered in and belonging to the Riding numbered 6,400 (146 births more than the previous year, an increase of 2·3%).

The birth rate for the Riding as a whole was 16·6 (per 1,000 estimated population), being higher than the rate for England and Wales—16·1.

Particulars of the rates in the several sanitary districts of the Riding are shown in Table I of the statistical tables appended to this report.

Illegitimacy.

The number of illegitimate live births registered during the year was 279 (34 more than in 1956) ; although this number increased, the position shows a marked improvement on 1944 and 1945 when the numbers were 462 and 547 respectively.

On the basis of population the illegitimate birth rate was .72 compared with .63 in 1956 and .67 in 1955, the rate per 1,000 live births being 43.59 as compared with 39.17 in 1956 and 43.25 in 1955.

Stillbirths.

The number of stillbirths registered in 1957 was 165 (an increase of 16 on the previous year). Further analysis of these figures into sexes indicates that there were 86 male and 79 female stillbirths. The rate per 1,000 total births was 25.78 in 1957 ; this rate compares with 23.47 in 1956 and 24.91 in 1955.

Deaths and Death Rates.

During 1957 the total number of deaths registered for the Riding was 4,358 (2,251 males and 2,107 females). The total figure gives an annual death rate of 11.3 in 1957 (per 1,000 estimated population), which is slightly lower than the figure for the previous year (11.4) ; in terms of urban and rural districts the death rates for the seven years ended 31st December, 1957, were as follows:—

		Death Rates.						
		1951	1952	1953	1954	1955	1956	1957
North Riding :—								
Urban Districts	..	13.8	12.3	12.2	12.1	12.2	12.3	12.1
Rural Districts	..	11.3	9.9	10.3	10.7	10.4	10.4	10.3
Administrative County		12.6	11.2	11.3	11.5	11.4	11.4	11.3
England and Wales	..	12.5	11.3	11.4	11.3	11.7	11.7	11.5

The particulars of the number of deaths and the rates in the several sanitary districts are tabulated at the end of this report.

Mortality at Different Ages from various Causes.

The details supplied by the Registrar General are shewn on Table 3 at the end of this report.

The principal causes of death in the County during 1957 were as follows, the figures for 1956 and 1955 being also given.

				1955	1956	1957
Influenza	..	..	..	17	37	57
Heart diseases	..	..	..	1,670	1,632	1,653
Other circulatory diseases	..	..	..	164	181	179
Bronchitis	..	..	..	151	166	154
Pneumonia	..	..	..	121	127	130
Congenital Malformations	..	..	..	38	40	37
Tuberculosis of the respiratory system				35	31	26
Tuberculosis (other forms)	..	..	..	8	3	5
Cancer, malignant disease	..	..	..	723	756	703
Vascular lesions of nervous system	..	..	..	675	685	664
Nephritis and nephrosis	..	..	..	40	40	47

The position in the various sanitary districts is set out fully in Tables 4, 5, 6, 8 and 9. Whereas in 1938, 11 deaths were ascribed to diphtheria, one was allocated to this cause in the years 1948, 1949 and 1957, 2 in 1953 and none in the years 1950, 1951, 1952, 1954, 1955 and 1956.

Cancer, Malignant Disease.

Cancer was responsible for 703 deaths in the Riding in 1957 and the following tabular statement shows the position for the last ten years :—

DEATHS AND DEATH RATES FROM CANCER.

Year.	Total Number of Deaths.			Death rate per 1,000 population.			
	County.	Urban Districts.	Rural Districts	County	Urban Districts.	Rural Districts.	England & Wales
1948	624	373	251	1.77	1.86	1.65	1.86
1949	633	390	243	1.79	1.93	1.61	1.87
1950	626	352	274	1.66	1.72	1.59	1.89
1951	646	403	243	1.70	1.98	1.38	1.96
1952	700	431	269	1.85	2.13	1.53	1.99
1953	696	442	254	1.84	2.16	1.47	1.99
1954	674	401	273	1.77	1.95	1.55	2.04
1955	723	435	288	1.88	2.10	1.62	2.06
1956	756	458	298	1.95	2.20	1.66	2.07
1957	703	421	282	1.82	2.02	1.59	2.09

Infantile Mortality.

There was an increase in the number of deaths of infants under 1 year, the total number for the year under review being 170, an increase of 10 compared with the previous year. The infantile mortality rate of 26.6 compares with 25.6 for the previous year and 23.0 for England and Wales.

The following table shows the infant mortality rates for the last 10 years.

Year	..	Urban Districts.	Rural Districts.	Administrative County	England & Wales.
1948	..	38.8	37.2	38.1	34.0
1949	..	41.7	36.1	39.3	32.0
1950	..	36.0	34.2	35.2	29.8
1951	..	38.5	27.3	33.7	29.6
1952	..	24.3	30.1	26.9	27.6
1953	..	33.0	26.8	30.2	26.8
1954	..	32.5	20.9	27.6	25.5
1955	..	28.0	27.4	27.7	24.9
1956	..	29.7	20.2	25.6	23.8
1957	..	28.5	24.0	26.6	23.0

The main causes of deaths among children under one year of age were as follows :—

	1957
Congenital malformations	.. 31
Pneumonia	.. .. 25
Bronchitis	.. .. 1
Gastritis, enteritis and diarrhoea	3

Measles.

During 1957 there were 4,694 notified cases of measles ; this figure excludes all cases of Rubella. Only two deaths were ascribed in 1957 to this disease ; for the last ten years the number of measles deaths totals 25. This seems to indicate that the treatment of the complications of measles is now much more effective than it was in the years before 1939 (14 in 1937, 18 in 1936, 72 in 1934).

Whooping Cough.

The total number of notified whooping cough cases in the Riding was 446 ; no death was registered as being due to this condition. The morbidity following whooping cough is not known, but one comes across the secondary effects of brain haemorrhage which seems to follow attacks of pertussis. This incidence of serious complications should stimulate parents to accept protection against this unpleasant disease.

Infantile Paralysis.

There were 23 notifications of acute poliomyelitis (paralytic and non-paralytic) or of acute encephalitis during the year under review, with three deaths, as compared with 44 notifications and 1 death in 1956. It will be recalled that the responsibility for the treatment of paralytic conditions following this type of virus infection lies with the regional hospital boards, but notification secures active enquiries into the sanitary conditions, particularly the disposal of excreta and refuse, nuisance from flies or from cesspits.

Administration.

The local health services have been administered as in previous years ; the report of the county medical officer for 1954 set out in detail the powers and duties and methods of administration and it is not proposed to repeat them this year.

Joint use of Staff.

The regional hospital boards have continued to supply specialist services without charge in connection with psychiatry, mental deficiency, refraction work, as well as for ear, nose and throat conditions; in the special sphere of crippled children the pre-1948 arrangements still applied whereby Mr. Crockatt and Dr. Adamson of the Adela Shaw Orthopaedic Hospital attended special clinics held in numerous places throughout the Riding. Family practitioners as well as school medical officers, refer children to these clinics ; the Education Committee has provided two specially trained orthopaedic after-care sisters to attend at these clinics, to hold separate sessions between the orthopaedic surgeon's visits, to renew plasters, adjust splints and supervise the after-care of children suffering from crippling defects by visits to the homes and schools. In this way there is a constant link between the school, the school health service and the home of the patient with immediate access to a special hospital when conditions require admission. The County Council, as local education authority, provides a special school for physically handicapped pupils at Welburn Hall, near Kirbymoorside, and the orthopaedic surgeons named above made fortnightly visits to this school without charge to the authority. Children are regularly admitted to this unit from authorities in Northern England ; cases have also been accepted from other parts of England especially when a grammar school type of education is required for a severely handicapped child.

Use of voluntary organisations.

In general, the local health authority uses voluntary organisations where such bodies can do the work satisfactorily and with less formality than officers of the Council ; for example, for the care of the unmarried mothers and the adoption of children, the County Council makes grants to various Diocesan bodies who provide after-care workers and make arrangements in connection with admissions to hostels and allied matters. The payments for the use of the hostels are now generally made on a customer basis. The County Council has also used the Scarborough Council for Social Service in connection with tuberculosis after-care and still had contractual arrangements with the St. John Ambulance Brigade for the provision of ambulance services in two areas.

CARE OF MOTHERS AND BABIES.

Last year a fairly full summary of the unfortunate position as regards the division of the functions relating to maternal and child care appeared in this report and a careful plea was made for a system of notification of pregnancy, similar to that which worked well during the war years because of the special issues of foods to pregnant women. There are still women who do not book midwives in time for adequate ante-natal care and who only attempt to secure dental treatment when the baby is 9 or 10 months old.

The added costs of any scheme of notification of pregnancy and routine follow-up by midwives would be small; there will probably be some additional expenditure on home helps but the gross hospital costs would be cut and the lives of many women who do not appreciate the hazards of unsupervised pregnancy would be saved. Some hospitals have medical staff who are much more helpful than others in sending copies of relevant letters which indicate the need for special nursing procedures, after-care, or special educational treatment.

At 91 places in the Riding, child welfare sessions are held as compared with 89 in 1956, 91 in 1955 and 55 in 1947. In 24 out of the 91 centres, ante-natal patients are also examined. The total number of attendances at infant welfare centres remains relatively stationary, the total attendances at infant welfare centres in the administrative county in 1957 being 61,749 as compared with 60,397 in 1956, and 61,391 in 1955. As regards the care of premature infants the provision of certain equipment on loan continues ; two more nurses have been given a special course of training for this purpose.

Three new centres were opened during the year at Sleights, Colburn and Catterick Camp, and one ceased to function at Hawnby owing to decreased attendances.

The average annual attendance per county administered centre is 679 the same as in the previous year. The average number per session attending was 27 as against 26 in 1956. The following table gives numerical details of the clinics held, the persons who attended and the attendances for the year 1957.

INFANT WELFARE CENTRES.

Number of centres provided at end of year	Number of Child Welfare sessions held during the year	Number of children who first attended a centre during the year, and who at their first attendance were under 1 year of age	Number of children who attended during the year and who were born in :			Total Number of children who attended during the year	Number of attendances during the year made by children who at the date of attendance were :			Total Attendances during the year
			1957	1956	1955-52		Under 1 year	1 but under 2	2 but under 5	
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
8	275	841	598	568	273	1,439	8,212	1,108	402	9,722
3	155	563	235	310	441	986	6,751	414	322	7,487
4	153	358	324	287	250	861	4,416	930	718	6,064
5	249	419	912	495	368	1,775	4,402	997	715	6,114
6	128	226	143	122	144	409	1,635	451	476	2,562
11	145	187	139	176	312	627	1,387	886	1,066	3,339
25	492	636	637	601	836	2,074	5,278	1,759	2,394	9,431
10	192	339	291	261	522	1,074	3,115	1,086	1,609	5,810
10	184	525	683	262	262	1,207	4,072	757	697	5,526
6	333	447	525	424	424	1,373	4,346	732	616	5,694
91	2,305	4,541	4,487	3,506	3,832	11,825	43,614	9,120	9,015	61,749

In addition North Riding children attended centres established by local authorities in adjacent areas as follows :—

Castle	48	13	9	8	7	24	102	21	13	136
bridge	52	7	86	41	66	193	81	40	77	198
on ..	676	12	6	6	2	14	64	15	1	80
n-in-										
le ..	48	2	2	4	2	8	12	4	—	16
..	304	3	2	3	—	5	4	25	—	29
..	1,128	37	105	62	77	244	263	105	91	459

Supply of Dried Milk during 1957.

At short notice all local health authorities in England and Wales had to improvise arrangements for the distribution of National Dried Milk and vitamin foods in the summer of 1954. Fortunately most of the volunteers (small shop-keepers in the country areas as well as the Women's Voluntary Service) agreed to continue. In addition to the arrangements made for the distribution of the official preparations, many proprietary dried milks and other nutrients are supplied at infant welfare centres and clinics : every encouragement has been given to mothers by the health visitors and other staff of the County Council to take up supplies of vitamin foods provided for them and for their children.

Care of Expectant and Nursing Mothers and Children under School Age.

Ante-natal clinics are held on premises owned or rented by the County Council at 39 places in the Riding either separately or in conjunction with infant welfare sessions ; these are staffed by medical officers with special experience in this type of work.

Specimens of blood are taken at all the County Council ante-natal clinics for transmission to the pathological laboratories set up either in the hospital service or in the Regional Blood Transfusion Service. In certain areas, practitioners refer patients to the ante-natal clinics so that blood specimens can be taken. The number of women who thus attended decreased from 2,617 to 2,065 and the total number of ante-natal attendances at North Riding clinics decreased by 253.

Pregnant women from the Riding attended at the ante-natal clinics in Middlesbrough, Ripon and York. Unfortunately there is still a large proportion of ante-natal women whose blood is not taken for examination ; this is only revealed when an investigation of stillbirths and neonatal deaths is carried out. The revision of the terms of service under the maternity medical scheme is long overdue.

As regards mothercraft training, this is one of the essential services provided at ante-natal and infant welfare clinics. The absence of such teaching at general practitioners ante-natal sessions is the main difference between a private ante-natal clinic and one operated by the local authority. Film strips, posters, leaflets and models have been used to illustrate the points in the talks given by medical officers and health visitors.

Maternity outfits are provided through clinics and through midwives for women who intend to have a domiciliary confinement. Each of the ten divisional offices has some accommodation for storage ; in addition, midwives often hold two or three spare outfits in their houses. The outfit supplied includes all the items set out in the appropriate Ministry's circular.

Special sessions were held at Redcar, Scarborough, South Bank and Thornaby-on-Tees for those women who desired post-natal examination by a woman medical officer.

The following table shows the variation between the numbers of attendances made by women at county ante-natal clinics between 1953 and 1957. The fall in numbers can be ascribed to two causes, the tendency of hospital ante-natal clinics to hold on to their patients and not to refer them for health education to local authority clinics, and increased bookings by general practitioners.

Item	1953		1954		1955		1956		1957	
	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal
Clinics ..	42	4	41	4	40	4	39	4	39	4
Sessions ..	986	133	978	133	1,021	137	1,009	84	1,202	87
Women attending	2,145	90	2,602	82	3,734	60	2,617	52	2,065	56
Total Attendances	7,596	106	7,455	85	6,827	60	7,043	49	6,790	57

Mobile Infant Welfare and Ante-Natal Unit.

Many of the rural villages and outlying hamlets in the North Riding within a radius of 25 miles of New Earswick are provided with a good service by means of a mobile clinic presented to the County Council in 1949 by the Joseph Rowntree Village Trust ; this unit, during the year under review, was drawn by a 30 h.p. Ford Pilot car. The unit is staffed by a woman medical officer, a qualified health visitor and a driver/clerk. Waiting rooms are hired in villages for the use of those awaiting examination and advice. The car is also used for the purpose of transporting mothers and children from hamlets and outlying dwellings to and from the unit which is usually drawn up alongside a hired waiting room in one of the larger villages. The attendances are set out in the following table ; these attendances are aggregated with those for static centres given on page 15.

	1953	1954	1955	1956	1957
Villages visited	22	21	21	20	19
Sessions held during the year ..	526	527	546	575	614
Expectant Mothers, Nursing Mothers and/or children using the service ..	1,527	1,407	1,204	1,177	1,042
Total number of attendances	7,417	7,373	6,383	5,875	5,642

In many rural areas special transport is hired to convey mothers and young children to centres established in nearby townships. In 1957, 29 centres were provided with this additional service at an approximate cost of £756. Sessions are held weekly, fortnightly or monthly, depending upon the need and the availability of staff and premises. Medical advice was available to mothers at all centres either from whole-time medical officers or from part-time medical practitioners who were paid sessional fees. Qualified nursing staff were in attendance at all sessions.

Care of Unmarried Mothers and their Babies.

Grants were made to the following moral welfare associations who gave, through their paid and voluntary workers, valuable help and advice to expectant and nursing unmarried mothers :—York Diocesan Association for Moral Welfare (York and North Riding Branch) ; Scarborough Moral Welfare Association ; Whitby Moral Welfare Association ; Co-ordinating Moral Welfare Council for the Deaneries of Middlesbrough, Guisborough and Stokesley ; Richmondshire Moral Welfare Association.

Fourteen unmarried mothers were admitted to Heworth Moor House, York, during 1957 and seventeen to a similar home at 21 Albemarle Crescent, Scarborough.

In addition 15 patients were admitted during the year 1957 to mother and baby homes at Harrogate, Hull, Leeds and Streatham. The social workers employed by the diocesan associations gave excellent service in this branch of public health.

The Care of Crippled Children (pre-school age groups).

Orthopaedic clinics, attended by an orthopaedic surgeon, were held in premises provided by the County Council at Thornaby, South Bank, Saltburn, Guisborough, Redcar, Carlin How, Whitby, Malton, Northallerton, Richmond and Scarborough ; clinics were also held at the Adela Shaw Orthopaedic Hospital, Kirkbymoorside and by arrangement with the York City Council in the York School Clinic.

Some 323 children attended orthopaedic clinics during the year ; of these 159 were new cases. The total number of attendances at these clinics during the year was 902.

Children over the age of two years who are materially handicapped by crippling defects are dealt with under regulations made by the Minister of Education under the Education Act, 1944. Admissions of children under the age of two years to orthopaedic hospitals were arranged for 20 children during 1957 : none of these children was suffering from tuberculosis.

Dental Treatment of Expectant and Nursing Mothers and Children under the age of 5 years not attending a maintained school.

The table below shows that some 79 mothers were treated in 1957 as compared with 131 in 1956 and that 45 of these were made dentally fit before the end of the year. The great shortage of dental staff has made it difficult to cope with the demand for treatment in the school health service but professional staff are encouraged to give more time to conservative treatment to mothers and young children instead of doing extractions and providing dentures ; there is great scope for the future employment of oral hygienists particularly in connection with the teeth of pregnant women and of nursing mothers immediately after the end of the puerperium.

(a) Number provided with dental care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	84	76	79	45
Children Under 5 ..	257	252	245	240

(b) Forms of dental treatment provided.

	Scalings and gum treatment	Fillings	Silver nitrate treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		Radiographs
							Full upper or lower	Partial upper or lower	
Expectant & Nursing Mothers	13	26	1	—	326	42	30	13	18
Children under 5	—	32	52	—	393	162	—	—	—

Family Planning.

Grants of £25 each were made to the local branches of the Family Planning Association at Northallerton, Richmond, Saltburn, Scarborough and Thornaby.

DOMICILIARY MIDWIFERY SERVICE.**Domiciliary Midwifery.**

The whole of the domiciliary midwifery service provided under s. 23 is administered directly by the County Council. Since 1949 there has been a decline in domiciliary midwifery and it is not now the policy of the County Council to make new appointments of whole-time midwives ; nurses in urban areas are appointed as district nurse/midwives. At the end of the year under review 15 whole-time midwives and 1 part-time were still employed in urban districts, 27 full-time nurses (plus 5 part-time) undertook combined duties and 61 nurses (plus 4 part-time) were carrying out generalised duties in rural districts.

The number of domiciliary confinements during the year is set out in the table below. For comparative purposes, figures for the years 1950, 1954, 1955 and 1956 are also given :—

	1950	1954	1955	1956	1957
Total Domiciliary Confinements ..	3,017	2,477	2,306	2,316	2,349
(a) attended by midwives ..	2,068	1,995	1,791	1,806	1,889
(b) attended by maternity nurses ..	949	482	515	510	460
Percentage of total notified births ..	56.5	42.6	39.9	37.6	37.0

Deliveries attended by midwives employed by the County Council during 1957 :—

Doctor not booked		Doctor booked		Total
Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	
31	314	419	1,575	2,339

Only 1,449 of these 2,339 babies were wholly breast fed on the fourteenth day in spite of the best efforts of the county midwives ; unfortunately much modern advertising is directed towards the use of substitute foods.

During the year, 554 cases delivered in institutions were attended by domiciliary midwives after discharge from institutions before the fourteenth day, compared with 560 in the preceding year and 343 in 1955.

It is interesting to note that in 1947, the last complete calendar year before the 'appointed day,' the percentage of domiciliary confinements taking place in the Riding was 91%.

Unfortunately admission on social grounds to many of the units in or near the Riding is still uncontrolled : early application is in some cases the only criterion. It is most desirable that the knowledge and experience of the County Council's midwives and health visitors should be fully used when decisions are made regarding the degree of priority for women who claim admission because of social conditions : maternity homes were originally provided as a form of rehousing during the puerperium, for those cases where conditions at home were unsatisfactory. Two nursing officers inspect midwives employed in private nursing homes or in maternity homes where there is no resident medical officer, and those practising privately within the administrative area of the authority, as well as the directly employed midwives. Midwives employed by the County Council attended refresher courses during 1957, as required by regulations.

Ante-natal supervision is provided by medical officers and midwives at the ante-natal clinics and at certain infant welfare centres, as well as at special midwives' clinics ; in addition, those midwives who are booked by expectant mothers who don't attend clinics, visit their patients at intervals. There is, on the whole, good co-operation between county midwives and general practitioners who undertake domiciliary midwifery under the maternity medical services scheme.

Notification of Intention to Practise.

It is the duty of every midwife who wishes to practise in the area of a local supervising authority to notify that authority each year of her intention to do so ; the following table shows the number who registered during the year 1957 in various categories (figures for preceding year in brackets).

No. of Midwives	Employed by the County Council	Engaged in private practice	Employed by Hospital Management Committees
177 (178)	115 (116)	4 (5)	51 (51)

* In addition 7 midwives were employed at the Military Families Hospital at Catterick Camp.

The Ministry of Health made, under Section 6 of the Midwives Act, 1936, an order which came into effect on the 1st September, 1938, prohibiting unqualified women from acting as maternity nurses for gain. Acting on the Defence (General) Regulations, 1939 (Regulation 33) the County Council still employed on midwifery duties during 1957 one person who had surrendered her certificate under the Midwives Act, 1936.

Medical Aid Records.

The Central Midwives Board is empowered by statute to make rules regulating supervision and restricting, within due limits, the practice of midwives. A midwife acting as such, or as a maternity nurse, is obliged to observe these rules. One of the most important of these rules is that she must send for medical aid in all cases of illness of the patient or child or for any abnormality occurring during pregnancy, labour or lying-in period. The following table shows the nature of some of the reports sent in by the county midwives, district nurse/midwives, independent midwives and midwives employed in maternity homes or nursing homes during the period under review as compared with the previous four years :—

	1953	1954	1955	1956	1957
Requests for medical aid ..	526	532	515	585	654
Stillbirth reports ..	39	37	39	43	38
Rise in temperature ..	16	20	14	11	32
Death of mother ..	—	2	1	—	1
Death of infant ..	8	8	20	12	12
Laying out dead body ..	17	27	17	11	15
Artificial feeding ..	193	261	283	377	467
Liability to be a source of infection ..	25	47	43	50	46

The following is a classification of the stages when midwives had to summon medical aid—

	1953	1954	1955	1956	1957
During pregnancy ..	116	88	85	94	97
During labour ..	260	284	283	331	347
During lying-in period ..	65	88	69	84	110
In respect of child ..	85	72	78	76	100

Liability to be a Source of Infection.

In accordance with the Rules of the Central Midwives Board, there is an obligation on a midwife to notify the local supervising authority when she is liable to be a source of infection. The number of notifications received each year since 1948 has varied from 103 in 1948, to 25 in 1953, 50 in 1956 and 46 in 1957 ; the medical officers in charge of the ten administrative areas have been given the duty of ensuring that proper steps are taken by each midwife before she returns to duty. In this connection, the assistance of the Public Health Laboratory Service is gratefully acknowledged for investigations into nose, throat, ear and other infections of midwives when it appeared that the safety of the mothers and babies might be endangered by the existence of such conditions.

Maternal Mortality.

The distribution of maternal deaths is shown in table 6 at the end of the report.

Premature Births.

PREMATURE LIVE BIRTHS										PREMATURE STILL-BIRTHS		
Born in hospital		Born at home and nursed entirely at home		Born at home and transferred to hospital on or before 28th day		Born in nursing home and nursed entirely there		Born in nursing home and transferred to hospital on or before 28th day		Born in hospital	Born at home	Born in nursing home
Total	Survived 28 days	Total	Survived 28 days	Total	Survived 28 days	Total	Survived 28 days	Total	Survived 28 days			
298	230	81	74	31	19	4	4	—	—	65	10	—

		1954	1955	1956	1957
Total premature live births	..	382	375	409	414
Total premature still-births	..	66	66	82	75

Notification of Puerperal Pyrexia.

During 1951 the Minister of Health, in exercise of his powers under Sections 143 and 283 of the Public Health Act, 1936, and other enabling powers, varied the regulations which are called Puerperal Pyrexia Regulations 1939 and the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926 and 1928. Puerperal Pyrexia was defined as "any febrile condition occurring in a woman in whom a temperature of 100·4° Fahrenheit (38° Centigrade) or more had occurred within fourteen days after childbirth or miscarriage."

In 1957, 26 notifications were received ; the circumstances of 52 patients who had a rise in temperature were investigated by the superintendent nursing officers.

Pemphigus Neonatorum.

Three cases were investigated by the Superintendent Nursing Officer.

Public Health (Ophthalmia Neonatorum) Amendment Regulations, 1937.

Ophthalmia neonatorum is an infectious condition of the eyes of infants commencing within twenty-one days of the date of birth, and under these Regulations the duty of notifying cases is placed on the medical practitioner in attendance. If a midwife is in attendance, she is obliged by the Rules of the Central Midwives Board to call in a doctor where there is any eye discharge, however slight. In 1957, one case was reported and made a satisfactory recovery. The superintendent nursing officers investigated 42 cases of "sticky eye"; this minor eye condition is much more common now than the routine use of silver nitrate solution or albucid both in hospitals and in private practice.

Analgesia used by Midwives.

At the end of 1957, 105 domiciliary midwives employed in the Council's service were qualified to use gas and air analgesia as compared with 104 on 31-12-56 and 102 on 31-12-55. One midwife received instruction in the use of gas/air analgesia during 1957.

The following table may be of interest and concerns the midwives employed by the County Council (the figures in brackets are those for 1956).

Domiciliary midwives trained to use gas/air apparatus	Sets of apparatus	Total domiciliary births	Patients receiving gas/air from domiciliary midwives		Patients receiving pethidine from domiciliary midwives	
			Doctor not present	Doctor present	Doctor not present	Doctor present
105 (104)	81 (81)	2,339 (2,308)	1,026 (992)	270 (213)	871 (885)	262 (248)

HEALTH VISITING.

The general arrangement is that in populous areas certificated health visitors are employed on health visiting and school nursing duties. Thirty-six such nurses were employed in 1957. In addition one qualified health visitor was employed jointly on tuberculosis and venereal disease work in the Scarborough district and an experienced but uncertificated health visitor continued tuberculosis visiting and school nursing in the Thornaby area.

In rural districts nurses are employed on generalised duties; 29 of these nurses hold the health visitors' certificate. In one area, health visitors attend on Saturday mornings in rotation at the local hospital and obtain a list of children who have been admitted during the preceding days and of those who are likely to be discharged home during the following week. In another area the deputy nursing officer attends and appropriate details are distributed from the central office. Any information available regarding pending discharge is telephoned to the home nurses via the area office so that they can make any necessary preparations.

The total number of visits of all kinds made by health visitors amounted to 116,260 in 1957 as compared with 103,862 in 1956 and 96,975 in 1949. There was some difficulty in recruiting health visitors in spite of the County Council's scheme for the provision of scholarships which were not all allocated because of lack of applicants. In these circumstances the health visiting had to be more selective in areas where there was a shortage of staff. The following table sets out details of visits made by the health visitors during 1957, classified as requested by the Ministry of Health.

	Expectant mothers	Children under 1 yr. of age	Children age 1 and under 2 yrs	Children age 2 but under 5 years	Tuber- culous House- holds	Other cases
Effective Visits	1,552	31,756	18,077	38,271	3,856	14,210
Ineffective Visits	143	2,456	1,592	3,179	754	414

The total number of children under 5 years of age visited was 31,765 ; 21,893 households were concerned in these visits.

Training.

The County Council has offered scholarships each year valued at £240 each to enable suitable nurses to take the health visitors course of training at recognised centres. Since July, 1948, 33 scholarships have been granted to suitable candidates and with two exceptions the students have obtained the qualifying certificate : one more scholarship was awarded during 1957. A condition attached is that the recipient must work in the administrative county for a period of two years after obtaining the certificate of the Royal Society for Health.

Facilities have been afforded to the Principal of the Bolton Technical College for H.V. students to obtain a week's experience in rural areas during the course of training. The County Council's health visitors find accommodation for these students and take them on their rounds as well as having the students as helpers at ante-natal clinics and infant welfare centres. Refresher courses for health visitors are not held within the Riding but vacancies are obtained at courses held by the Royal College of Nursing ; during 1957 three health visitors attended post certificate refresher courses.

HOME NURSING SERVICE.

When the County Council took over the home nursing service from district nursing associations in July, 1948, it was decided to employ whole-time home nurses in the urban areas. Following the decline in domiciliary midwifery, it has become the practice to appoint doubly qualified nurses to undertake combined duties in these districts. On 31-12-57 there were 18 whole-time home nurses, 13 part-time home nurses, 27 nurses (and 5 part-time) undertaking midwifery and home nursing, and in the rural districts 61 nurses (and 4 part-time) were undertaking duties of a generalised character : the home nurses have worked very well with the general practitioners and complaints regarding them are rare.

Some slight progress was made during the year in the early notification of names of patients being discharged from hospital and requiring nursing care at home. Previously the family doctor only knew of the discharge of the patient when he received the discharge report from the hospital consultant but sometimes in urgent cases the home nurse is now advised directly by telephone from the hospital.

The main types of cases attended by home nurses are medical, surgical and tuberculosis cases. About 70% of the cases fall into the "medical" category. There is no night nursing service as such, although many nurses do an evening round ; a night nursing service does not seem practicable or justifiable in an area which is mainly rural.

During the year under review, 26,413 patients received domiciliary visits to the total number of 225,056 and an analysis of these patients is set out below. Both these figures are about 7% more than in 1956.

Type of Case	Medical	Surgical	Infec- tious Diseases	Tuber- culosis	Maternal compli- cations	Others	Total
Number of cases	19,663	5,945	61	608	93	43	26,413
Number of visits	166,494	42,546	288	10,055	911	4,762	225,056

Of the total patients 3,385 were over the age of 65 at the date of the first visit and 90,824 such visits were made. 4,631 visits were made on 737 children who were under the age of 5 at the first visit.

Training.

Arrangements are made for a small number of district nurses to attend refresher courses organised by the Queen's Institute of District Nursing ; opportunities are also given for district nurses to attend one or two day courses in the adjoining County Boroughs. Arrangements are also made through the Queen's Institute of District Nursing for suitable candidates to take a four or six months' course of district training. In some cases recipients of health visitors scholarships undertake combined district and health visitors training under the auspices of the Queen's Institute Scheme.

VACCINATION AND IMMUNISATION.

The health visitors are given the duty of stimulating the interests of parents in immunisation of the child population against diphtheria, but it is more difficult to interest a parent in vaccinating a child. The virtual disappearance of diphtheria and smallpox tends to make parents careless and difficult to convince on the merits of protective measures. Many practitioners, though they have a financial incentive to immunise, are not maintaining their interest in this matter until a case occurs, or a positive swab is reported.

During 1952 the County Council added a scheme for immunising children against whooping cough and for some years both single antigens and a combined pertussis was supplied. In deference to a statement from the Medical Research Council, however, the increased danger of paralysis following the mixed antigens was recognised and since December, 1957, the Council has only supplied single antigens under its proposals. The need for early administration of whooping cough vaccine arises because of the fact that the postponement of the disease for the first few months of life is very important but the body of a child does not react properly to the diphtheria antigens till some five or six months later.

In most districts sessional arrangements have been made for the administration of booster doses to children on entry to school and later during school life as may appear expedient. In 1939 there were 332 cases of diphtheria and 12 deaths from this disease : after a long interval of apparent freedom, one case was notified in 1957 and that proved fatal. The opinion is still held that the personal influence of doctor, health visitor or midwife is the most effective agent in securing parental consent to immunisation : leaflets and advertisements are not nearly so effective.

A fee of 5/- is paid to medical practitioners for every notification of immunisation or vaccination except when sessions are organised by the Council's staff when the proper sessional fee is payable.

The following tables give the number of children within specified age groups who had, at the end of 1957, been immunised or vaccinated. Comparative figures are given for the preceding six years.

DIPHTHERIA IMMUNISATION.

Year	Estimated population under 5 yrs.	Children under 5 immunised	Estimated population 5-14 yrs.	5-14 yrs. children immunised	Total est. pop. under 15 yrs.	Total children immunised under 15 yrs.
1951	31,760	16,334	53,630	33,340	85,390	49,674
1952	30,900	16,425	55,900	37,869	86,800	54,294
1953	30,000	14,668	57,000	49,743	87,000	64,411
1954	30,200	16,529	57,800	54,067	88,000	70,596
1955	30,000	15,960	59,300	55,182	89,300	71,142
1956	30,100	17,144	60,200	51,495	90,300	68,639
1957	30,300	17,015	60,300	52,624	90,600	67,639

It will be noted that 51% of the younger age group received immunisation in 1951, 53.2% in 1952, 48.9% in 1953, 54.7% in 1954, 53.2% in 1955, 56.6% in 1956 and 56.2% in 1957. In the older age group the immunity index was 44.3.

SMALLPOX VACCINATION.

The following table sets out the position as regards vaccination against smallpox in the year under review.

Year	Vaccinations				Re-vaccinations			
	Under 1 yr.	1-14 years	15 yrs. & over	Total	Under 1 yr.	1-14 years	15 yrs. & over	Total
1950	851	434	221	1,506	34	98	424	556
1951	1,135	428	296	1,859	21	83	686	790
1952	1,360	364	296	2,020	1	95	656	752
1953	1,682	549	454	2,685	—	215	812	1,027
1954	1,705	306	223	2,234	5	218	573	796
1955	1,525	275	153	1,953	7	149	296	452
1956	1,850	264	166	2,280	13	100	262	375
1957	1,897	257	139	2,293	2	120	293	415

POLIOMYELITIS VACCINATION.

During the early months of 1957 the anti-poliomyelitis campaign was continued, the numbers of children vaccinated being dependent on the amount of vaccine received this being always insufficient for the demand. In May the Ministry of Health extended the scheme to include children born in 1955 and 1956. Later in the year the scheme was extended further to include all children born in 1943 to 1956 inclusive, those born in 1957 over six months old and expectant mothers. The impact of these extensions was not felt during the year under review. Most of the clinical sessions were carried out by the medical staff of the authority and the following table shows the work done in 1957.

Number of persons	Year of Birth		Expectant Mothers	Total
	1943-1946	1947-1957		
Given two injections ..	17	19,298	—	19,315
Given one injection ..	NOT AVAILABLE IN GROUPS			1,708
Awaiting vaccination	65	7,522	1	7,588
TOTAL ..	82	26,820	1	28,611

COUNTY AMBULANCE SERVICE.

Radio Control.

The installation of the scheme which the Committee had approved in April, 1956, was commenced during September and by the end of the year the majority of the work had been done. While it is too early to forecast precisely the economies which will be achieved, present indications are that the saving in mileage alone will justify its installation.

Vehicles.

The number of vehicles owned by the County Council at the end of the year was 31 traditional ambulances and 39 dual-purpose vehicles. Two further diesel ambulances were taken into service and have proved economical in use.

Staff.

The number of personnel directly employed by the County Council on 31st December shows no change from the previous year. However, owing to the decision of the Industrial Disputes Tribunal which restricts standby duty to duty at home arrangements were in hand to provide alternative night cover throughout the Riding and an increase in the establishment of 13 drivers has been approved for this purpose.

Statement of patients carried and mileage incurred during the period 1st January, 1957—31st December, 1957.

COUNTY COUNCIL

Depot/Station		Patient Journeys	Mileage
Scarborough Depot .. ..	..	20,711	114,647
Redcar Depot .. ..	..	25,151	171,455
Thirsk Station .. ..	..	10,249	114,867
Haxby Station .. ..	..	12,328	97,976
Malton Station .. ..	..	7,943	96,852
Richmond Station .. ..	..	9,268	140,542
Northallerton Station .. ..	..	6,170	80,849
Bainbridge Station .. ..	..	3,577	66,084
Whitby Station .. ..	..	3,980	52,004
Thornaby Station .. ..	..	12,397	53,377
Kirkbymoorside Station .. ..	..	5,404	85,818
TOTAL ..		117,178	1,074,471

VOLUNTARY ORGANISATIONS

Eston (S.J.A.B.) .. ..	..	13,064	91,479
Carlin How (S.J.A.B.) .. ..	..	7,038	69,579
Great Ayton (S.J.A.B.) .. ..	..	1,713	36,813
TOTAL ..		21,815	197,871

HOSPITAL CAR SERVICE.

Depot/Station			Patient Journeys	Mileage
Whitby	..	..	7	725
Richmond	..	..	147	2,761
Wensleydale	..	..	96	1,709
TOTAL			250	5,195

OTHER AUTHORITIES.

Darlington	..	..	84	1,183
Durham	..	..	820	9,291
TOTAL			904	10,474

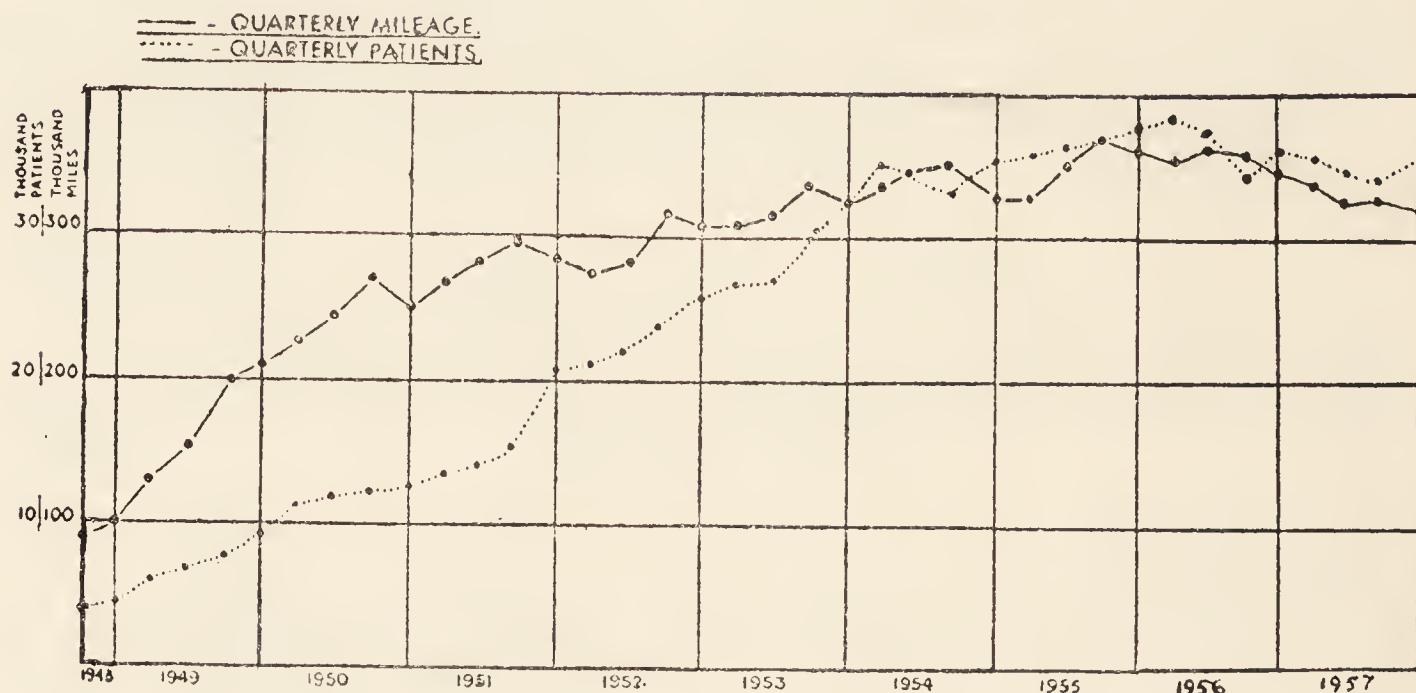
SUMMARY.

County Council	..	..	117,178	1,074,471
Voluntary Organisations	..	..	21,815	197,871
Hospital Car Service	..	..	250	5,195
Outside Authorities	..	..	904	10,474
GRAND TOTAL			140,147	1,288,011

It is interesting to note that whereas the demand for ambulances remains steady the mileage continues to decrease. This is due to increased co-ordination and strict checking of all requests received. The following table shows the average number of miles run per patient during the years indicated :—

1948 (part)	1949	1950	1951	1952	1953	1954	1955	1956	1957
24.41	22.50	19.82	18.91	12.92	10.90	9.77	9.40	9.45	9.19

The improved mileage per patient is illustrated in the graph given below :—



SECTION 28, PREVENTION OF ILLNESS— CARE AND AFTER-CARE.

(a) TUBERCULOSIS.

The proposals made by the County Council under Section 28 of the National Health Service Act, 1946, as approved by the Minister of Health provide for the carrying out of the Health Committee's functions by area sub-committees ; in fact several of the functions of the Health Committee under Section 28 are carried out by area after-care committees. Care committees are established in eight out of ten health areas ; care work in the other two is carried out directly by the local health sub-committees ; the grants made during 1957 are set out below.

The provision of open air shelters is dealt with centrally because of their cost and in order to solve problems of storage and use. Extra nourishment, beds, bedding and nursing requisites can be obtained on a recommendation made by a chest physician or general practitioner to the local health office, or to County Hall.

Materials for occupational therapy for patients discharged from sanatoria are provided through voluntary organisations, *e.g.* the British Red Cross Society, or care committees. No reasonable request for materials has ever been refused ; no trained occupational therapist is however available.

Each person notified as suffering from tuberculosis can obtain on the recommendation of the chest physician one pint of extra milk per day without charge. Additional nourishment is dealt with by care committees on the recommendation of the family practitioner or of the chest physician in special cases.

Some 760 North Riding residents had been vaccinated with B.C.G. up to the end of 1956 ; a further 265 were vaccinated during 1957 by the chest physicians of the Regional Hospital Boards. B.C.G. vaccination was not carried out by whole-time officers of the County Council during the year.

Qwing to the rural nature of this county and to the policy of providing chest clinics in the major towns in or adjacent to the Riding, it has not usually been practicable to arrange for the regular attendance at these clinics of the health visitors in whose area the patients reside, as a large percentage of the patients seen on any particular day come from other nurses' districts, or even from the area of another authority.

Local housing authorities have co-operated well in the matter of re-housing tuberculous families ; help is generally readily given by housing allocation committees. In the course of follow up some 864 home contacts of tuberculous families have been examined by the chest physicians : 21 of these contacts received some degree of specialist treatment for tuberculosis.

It has been the practice since 1950 to reimburse care committees the amount of their approved expenditure for the previous year. During the financial year 1957/1958 grants were made to the various committees as follows :—

Care Committee	Gross Expenditure	Income from non-C.C. sources	Net expenditure reimbursed by County Council
	£	£	£
Eston ..	283	7	298
Redcar ..	108	2	106
Guisborough ..	3	4	—
Whitby ..	100	54	46
Ryedale ..	44	—	44
Bulmer ..	67	4	63
Scarborough ..	232	—	232

(b) MENTAL ILLNESS OR DEFECTIVENESS.

Arrangements for the care and after-care of persons suffering from mental illness or defectiveness are dealt with by the Mental Health services sub-committee of the Health Committee ; see page 34 for details of the work of this standing sub-committee.

(c) OTHER TYPES OF ILLNESS.

As regards illness generally, certain items of equipment, *e.g.* special beds and mattresses, can be obtained on request from local health offices ; in addition each home nurse has access to a supply of nursing requisites which she may leave on loan in a patient's home without charge. Health visitors are being used by medical officers of health in certain areas to follow up cases of notifiable disease and to ensure that adequate nursing is available ; they are better able to give advice to parents on the prevention of further infection and the care of children than sanitary staff, particularly now that terminal disinfection has been virtually abandoned except after certain serious diseases, *e.g.* tuberculosis, typhoid fever and smallpox.

Certain care committees have raised funds to expend on the welfare of patients suffering from illnesses other than tuberculosis. These amounts vary from £5 in one instance to £791 in the case of the Committee associated with the Scarborough Council for Social Services.

(d) CONVALESCENT HOME ACCOMMODATION.

Convalescent accommodation was offered to 24 individuals in 1957 as compared to 34 in 1956, 53 in 1955, 48 in 1954 and 30 in 1953. Accommodation is found for adults and children of both sexes and is limited to a maximum stay of 4 weeks. As this service is a type of holiday-rest service for those who are "run down" care has to be exercised to guard against persons using it as a means of obtaining a holiday for little or no cost.

The following table gives details of admissions to convalescent homes through the County Council's scheme in 1957 :—

Convalescent Home	No. admitted				Total Stay in days	Aver. Stay in days	Cost including travelling	Amount Recovered	Nett cost (excluding admini- stration)
	Adults		Chil- dren						
	M	F	M	F					
							£ s. d.	£ s. d.	£ s. d.
West Hill, Southport	—	8	—	—	112	14	96 15 8	27 14 7	69 1 1
Semon, Ilkley	—	1	—	—	14	14	7 0 0	7 0 0	—
Blackburn, St. Annes	3	7	—	—	140	14	107 14 2	35 2 0	72 12 2
Church Army, Southport	—	1	—	1	28	14	10 1 4	1 0 4	9 1 0
N.A.P.T., Bournemouth	1	—	—	—	14	14	14 16 8	3 13 2	11 3 6
N.A.P.T., Leconfield	—	1	—	—	21	21	19 11 8	4 4 0	15 7 8
N.A.P.T. Broadstairs	—	1	—	—	21	21	24 2 6	3 3 0	20 19 6

PROTECTION OF CHILDREN FROM TUBERCULOSIS.

During 1957, 32 employees of the Children's Committee were surveyed in connection with their work or proposed employment in close contact with groups of children ; the cost is charged to Section 28 of the National Health Service Act, 1946. Some of these examinations are carried out by the Mass Radiography Service when surveys are being held in a suitable locality ; in other cases arrangements are made with a private radiologist, who uses full size films.

In addition to the above, 292 persons employed by the Education Committee and 174 applicants for admission to a teachers' training college were x-rayed. The co-operation of the medical and technical staff of the mass miniature radiography units has been much appreciated. As in previous years I am indebted to Dr. G. Walker, the chest physician to the Northallerton area, for his helpful advice in doubtful cases.

HEALTH EDUCATION.

Advice on personal and environmental hygiene is freely given by health visitors employed in the County Council's service to mothers with children under school age and to families in which a clinical case of tuberculosis has occurred ; generally the advice is welcomed and accepted. Advice is also given on health matters at infant welfare centres, ante-natal and post-natal clinics, both orally and by means of pamphlets. Members of the medical staff have also given talks in their own areas as local M.O.H. ; the three county health inspectors have systematically dealt with the peculiar problems of food handling in talks given to employees in the schools meals service. A film projector has been provided by the Council to help in this work : films are hired from time to time. Film strips are also provided for general use.

DOMESTIC HELP SERVICE.

The domestic help service continues to expand. In 1947, 46 families were given help by 45 part-time helpers as compared with 681 families in 1954, 705 families in 1955, 766 families in 1956, and 845 families in 1957. In 1956 the number of helpers employed by the County Council was 20 whole-time and 150 part-time ; in 1957 the corresponding service had 25 whole-time and 162 part-time employees. It has been found desirable in rural areas to employ part-time domestic helps in order to avoid waste of working time.

The County Council's proposals under the National Health Service Act 1946, provided for the employment of the equivalent of 80 full-time workers either in a whole-time or part-time capacity for the purpose of providing domestic help for those in need. Priority is given (i) to women having a domiciliary confinement, (ii) to persons requiring help because of sickness or pregnancy of the housewife or her absence in hospital, (iii) to other cases of acute illness particularly of children, where there is a number of healthy children to be cared for, and thereafter (iv) to aged persons or chronic sick persons who are unable to obtain admission to hospital. During the year under review the establishment was increased from 80 to 90 full time helps or their equivalent in part-time workers.

At the end of the year under review, the standard charge to persons obtaining domestic help was 3/-d. per hour, recovery of whole or part of the cost of providing the service from the person receiving domestic help is assessed according to a scale of assessment. The following table gives the number of helps employed, the hours worked, the families who received help and those who paid the standard charge in each of the ten health areas of the Riding.

Area	Domestic Helps			Recipients of Domestic Help	
	Employed or registered at end of year		Hours worked	No. who received help	No. who paid standard charge
	Whole-time	Part-time			
Thornaby ..	6	5	17,378	91	15
Eston ..	2	19	32,735	165	19
Redcar ..	1	12	17,684	106	25
Guisborough ..	6	7	16,999	60	6
Whitby ..	1	6	7,141	35	12
Ryedale ..	—	36	20,457	64	1
Bulmer ..	—	28	12,993	75	9
Wensleydale ..	—	25	16,813	67	6
Richmond ..	—	22	14,397	52	4
Scarborough ..	9	2	17,340	130	24
Totals ..	25	162	173,937	845	121

MENTAL HEALTH SERVICES OF THE AUTHORITY.

Mental Deficiency.

During 1957, the County Council employed three whole-time Mental Health Workers. All three are authorised under the Mental Deficiency Acts and, with the exception of those functions necessarily performed by registered medical practitioners, they made all the routine and statutory visits under these Acts. In addition, they supervised and reported upon defectives on licence and holiday leave when requested to do so by the Superintendents of the mental deficiency hospitals. During 1957 the Mental Health Workers made 2,862 effective visits. Although the authority's nine Duly Authorised Officers are authorised under the Mental Deficiency Acts as well as under the Lunacy Act, their work in the former connection has been confined to the sporadic presentation of petitions.

The arrangements whereby psychiatrists employed by Leeds and Newcastle-upon-Tyne Regional Hospital Boards are available for consultation and advice continued to work satisfactorily ; cases can also be seen by the medical superintendents of mental deficiency hospitals in the areas of both boards. This help and advice has been appreciated alike by parents of children and the staff of this authority on several occasions during the year.

Admissions to Hospital.

The number of cases admitted in 1957 to mental deficiency hospitals was again far short of the figure necessary to eliminate, even over a period of years, the very long waiting list. Indeed, the rate of admission has again failed to keep pace with the rate of notification of new cases requiring hospital care. Instances have occurred in which mothers of defective children themselves suffered a breakdown in health as a direct result of the heavy burden carried. This is surely a clear indication for adequate accommodation as an important step in preventive medicine.

Hospital admissions, discharges and deaths in 1957 as compared with those in the five previous years are given in the following table :—

Year	Admitted		Discharged		Deaths	
	M.	F.	M.	F.	M.	F.
1952	7	22	3	5	4	2
1953	18	16	2	3	4	4
1954	26	7	2	5	2	1
1955	10	6	4	9	2	4
1956	21	21	7	6	2	2
1957	14	4	8	13	4	4

Details of the numbers of defectives in hospital, on licence from institutions and under guardianship on 31st December, 1957, are as follows :—

	M.	F.	Total
(i) Defectives in Regional Hospital Board Hospitals on 31st December, 1957 :—			
Under 16 years of age	35	21	56
Over 16 years of age	178	189	367
(ii) On Licence from Institutions :—			
Under 16 years of age	—	—	—
Over 16 years of age	32	15	47
(iii) In Rampton and other State Institutions :—			
Under 16 years of age	—	—	—
Over 16 years of age	18	12	30
(iv) Under Guardianship :—			
Under 16 years of age	2	2	4
Over 16 years of age	2	2	4

Notifications.

Sixty-seven cases were notified for the first time during 1957 from the following sources :—

	M.	F.
(i) Under Section 57 (3) Education Act, 1944	5	12
(ii) Under Section 57 (5) Education Act, 1944	7	11
(iii) Other sources, subject to be dealt with	9	2
(iv) Reported but not ascertained on 31-12-56	9	13

Some of these 67 were dealt with as follows during 1957 :—

	M.	F.
(i) Admitted to Institutions	1	1
(ii) Placed under statutory supervision	18	23
(iii) Placed under voluntary supervision	4	5

The total numbers of defectives on the register on December 31st, 1957, were as follows :—

	M	F
(i) In institutions (including those on licence therefrom) ..	263	237
(ii) Under guardianship	4	4
(iii) In " place of safety "	—	—
(iv) Under statutory supervision	191	210
(v) Number of persons who are not " Subject to be dealt with " but under some degree of supervision	54	49

During the year 10 defectives were admitted to hospitals under the control of the regional hospital boards under the provisions of Ministry of Health Circular 5/52 ; no additional expenditure for accommodation has been incurred by the authority.

Mental Illness.

Nine duly authorised officers carry out duties under the Lunacy and Mental Treatment Acts. These officers are also authorised under the Mental Deficiency Acts and are employed as district welfare officers ; 21% of the salary of each is allocated to mental health. During 1957 these officers made 1,129 visits in connection with statutory duties under the Lunacy and Mental Treatment Acts and 160 visits in connection with after-care. In addition mental health workers have carried out home visits to discharged patients in suitable circumstances.

Lunacy and Mental Treatment Statistics.

Visits made in connection with the care and after care of patients (excluding those necessary for admission to hospital)	872
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North Riding patients
admitted to hospital.

	1952	1953	1954	1955	1956	1957
(i) Voluntary ..	374	384	427	493	513	548
(ii) Certified ..	132	160	157	174	195	116
(iii) Temporary ..	17	10	7	5	10	8
(iv) Section 20 cases ..	77	84	69	57	72	65
(v) Urgency orders ..	14	13	20	—	—	28

Occupation Centres and Classes.

(a) ALDERMAN COCKERILL OCCUPATION CENTRE—SCARBOROUGH.

The names of 13 children were on the register at the end of the year. Transport was provided by the county ambulance service. A mid-day meal is provided through the school meals service ; meals are provided free in approved cases. Medical inspections of the children attending the centre are carried out twice annually. During the year an inspector from the Board of Control visited the centre and a satisfactory report was received.

(b) CLEVELAND OCCUPATION CENTRE.

This centre was opened in July, 1953, with accommodation for 32 defectives, and was extended during the latter part of 1954 and early 1955. to accommodate a further 25 children. The names of 57 children were on the register on 31st December, 1957. A mid-day meal is provided in the same way as at Scarborough and transport is provided by the County Ambulance Service and private hire cars.

(c) WHITBY CLASS.

This class continued to function on three half days a week under the supervision and instruction of a mental health worker who is also a qualified occupation centre supervisor. The number in attendance in July, 1957, was 7. A mid-day meal is provided on the same lines as at the two occupation centres but parents make their own transport arrangements.

(d) OCCUPATION CENTRES CONTROLLED BY OTHER AUTHORITIES.

The council again sent defectives living near Middlesbrough and York to occupation centres controlled by these boroughs ; at the end of the year 8 North Riding children were attending the York centre, six the Middlesbrough centre and one the Darlington centre. In addition four children attended at Claypenny Hospital " school " and agreed payments were made to the York " B " Hospital Management Committee.

PUBLIC HEALTH ACT, 1936 (NURSING HOMES).

The number of nursing homes registered at the end of 1957 was 12 the same as in the previous year. Any premises which are the subject of an application for registration are inspected and reported upon by a medical officer ; after registration, nursing homes are supervised and inspected by officers of the medical department. There was one new registration in 1957. One certificate of registration was surrendered voluntarily owing to the discontinuance of the use of the premises for the purpose of a nursing home.

The number of beds provided in these nursing homes at the end of 1957 was 172 (maternity 13 ; others 159).

BLIND PERSONS.

The number of persons whose names were on the register of blind persons at 31st December, 1957, was 762. Of these 83 (38 males, 45 females) were ascertained on form B.D.8 during 1957.

The numbers of registered blind persons for whom operative treatment for cataract or glaucoma had been recommended since 1934 are 110 and 3 respectively.

During 1957 operative treatment for cataract was recommended for 17 people, (15 of whom were registered during the year and 2 were registered during previous years), and one person was recommended for operative treatment for glaucoma. 10 of these people have received treatment for cataract ; one died before an operation could be performed ; one refused treatment on the grounds of age and ill health ; in one case the doctor advised against operative treatment ; one refused the operation for reasons unknown and four cases were awaiting operation (one for glaucoma) at the end of the year.

TUBERCULOSIS.

New Cases.

The number of notifications of all forms of tuberculosis received in 1957 was 175 as compared with 214 in 1956.

Table I shows the number of new notifications during the last thirteen years:

TABLE I.

Year	Total	Pulmonary	Non-Pulmonary
1945	260	164	96
1946	256	173	83
1947	262	200	62
1948	331	243	88
1949	280	213	67
1950	267	224	43
1951	298	250	48
1952	224	188	36
1953	266	231	35
1954	233	202	31
1955	193	169	24
1956	214	192	22
1957	175	156	19

Table II shows the number of primary notifications of new cases of tuberculosis in age and sex groupings and Table III the age and sex distribution of new cases notified and deaths during the year.

TABLE II.
Formal Notification.

Age-Periods	Number of Primary Notifications of new cases of tuberculosis													
	Under 1 year	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total (all ages)
Pulmonary—														
Males ..	—	1	1	4	5	8	5	16	13	15	14	7	2	91
Females ..	1	1	3	5	2	10	6	18	7	6	4	2	—	65
Non-														
Pulmonary														
Males ..	—	—	1	3	—	—	—	2	2	—	—	1	—	9
Females ..	—	—	—	1	—	1	1	2	2	2	—	1	—	10

TABLE III.

Age Periods		NEW CASES NOTIFIED.				DEATHS			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M.	F.	M.	F.	M.	F.	M.	F.
0-	..	—	1	—	—	—	1	—	—
1-	..	2	4	1	—	—	—	—	—
5-	..	9	7	3	1	—	—	—	—
15-	..	42	41	4	6	1	3	1	—
45-	..	29	10	—	2	10	1	—	2
65-	..	9	2	1	1	9	1	2	—

In Table IV the distribution of new cases district by district with comparative figures for the five preceding years is given : the deaths from tuberculosis are similarly set out in Table 5 at the end of this report

TABLE IV.

District	1952		1953		1954		1955		1956		1957	
	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.
URBAN DISTRICTS.												
1. Eston	47	4	47	5	21	2	20	4	37	—	25	—
2. Guisborough ..	1	—	—	—	3	—	5	1	2	—	2	—
3. Loftus	2	1	—	—	1	1	2	—	3	1	1	—
4. Malton	1	—	—	—	1	—	—	—	—	—	—	—
5. Northallerton ..	—	1	6	1	4	1	3	1	2	—	5	—
6. Pickering	—	—	—	—	—	—	1	1	1	—	—	—
7. Redcar	28	7	35	7	20	4	27	1	29	1	20	—
8. Richmond	5	—	4	—	4	—	3	1	5	—	2	—
9. Saltburn	7	—	3	2	4	1	2	—	4	—	5	—
10. Scalby	1	—	2	—	2	1	2	—	3	1	—	—
11. Scarborough ..	13	—	29	4	17	4	24	3	20	2	9	—
12. Skelton & Brotton	—	1	—	—	11	1	4	—	5	3	9	—
13. Thornaby-on-Tees	6	2	27	2	28	—	17	—	17	—	14	—
14. Whitby	5	1	—	—	3	1	3	2	7	1	7	—
Total Urban ..	116	17	153	21	119	16	113	14	135	9	99	—
RURAL DISTRICTS.												
1. Aysgarth	2	—	5	—	1	2	1	—	2	1	—	—
2. Bedale	—	1	5	—	3	1	1	—	2	1	2	—
3. Croft	—	—	—	—	2	—	—	—	—	—	4	—
4. Easingwold	3	2	7	—	5	1	3	1	9	4	3	—
5. Flaxton	15	3	7	4	6	1	11	5	10	3	8	—
6. Helmsley	—	1	—	—	2	—	2	—	2	—	1	—
7. Kirbymoorside ..	—	—	2	1	2	—	—	—	1	1	—	—
8. Leyburn	4	—	2	—	7	1	3	—	2	—	2	—
9. Malton	1	1	1	—	3	—	1	—	—	—	1	—
10. Masham	—	—	—	—	—	1	1	—	—	—	—	—
11. Northallerton ..	1	1	4	1	3	—	1	—	1	—	3	—
12. Pickering	2	—	1	—	2	—	—	—	—	—	2	—
13. Reeth	1	2	—	2	2	—	1	1	—	—	—	—
14. Richmond	14	1	15	3	16	2	13	1	9	1	13	—
15. Scarborough ..	1	—	3	1	1	1	—	—	2	—	3	—
16. Startforth	2	—	—	—	2	—	—	—	—	—	—	—
17. Stokesley	17	3	17	2	10	1	8	1	11	—	7	—
18. Thirsk	7	2	7	1	10	1	4	—	4	1	3	—
19. Wath	—	—	1	—	—	1	1	—	1	—	3	—
20. Whitby	2	2	1	—	6	2	5	1	1	1	2	—
Total Rural ..	72	19	78	14	83	15	56	10	57	13	57	—
Administrative County	188	36	231	35	202	31	169	24	192	22	156	1

Deaths and Death Rate.

31 deaths were ascribed to tuberculosis in 1957 as compared with 34 in 1956, 43 in 1955 and 50 in 1954.

Table V which follows shows the mortality from pulmonary and non-pulmonary tuberculosis over the last nine years and gives the corresponding figures for England and Wales.

		Deaths from Pulmonary Tuberculosis.								
		1949	1950	1951	1952	1953	1954	1955	1956	1957
No. of deaths	..	127	104	70	60	42	39	35	31	26
Rate per 1,000 population	..	0.36	0.28	0.18	0.16	0.11	0.10	0.09	0.08	0.07
		Deaths from Non-Pulmonary Tuberculosis.								
		1949	1950	1951	1952	1953	1954	1955	1956	1957
No. of deaths	..	20	13	16	9	17	11	8	3	5
Rate per 1,000 population	..	0.06	0.03	0.04	0.02	0.04	0.03	0.02	0.008	0.01
The death rates in England and Wales were :—										
Pulmonary tuberculosis		.403	.321	.275	.212	.179	.160	.131	.109	.095
Non-Pulmonary tuberculosis		.054	.043	.041	.028	.022	.019	.015	.012	.012

The whole-time and part-time health visiting staff of the Riding made 3,856 visits in connection with the after-care of tuberculous persons. The Home nurses also made 10,055 visits to 608 tuberculous patients.

During 1952 the Public Health (Tuberculosis) Regulations, 1930, were revoked ; these were replaced by the Public Health (Tuberculosis) Regulations, 1952. The new Regulations no longer require medical officers of health to keep a register of tuberculosis notifications, but the Minister of Health expressed the view that they should continue to do so.

The requirement in the 1930 Regulations for providing information of a tuberculosis patient entering or leaving a sanatorium or hospital was omitted from the present Regulations. The Minister has, however, asked Hospital Boards and Committees to ensure that this information (as for any patient with a notifiable disease) is sent by the institution staff concerned to the medical officer of health of the district to which the patient belongs.

Contacts of cases of tuberculosis are examined by the chest physicians. This also applies in those cases where tuberculosis is not ascertained until the death of the patient. In the County area during 1957, 864 contacts were examined as compared with 156 notified cases of pulmonary disease. The corresponding figures for 1956 were 1,034 and 192 respectively. Of the 864 contacts examined 21 were found to have tuberculosis.

There is no specific county-wide scheme for ascertaining early cases amongst children and others. Some are detected by the mass radiography service ; others are referred to chest physicians by general practitioners ; they are then kept under supervision and if necessary admitted to hospital. Mass radiography surveys are helpful but are only held at infrequent intervals in certain of the more populated parts of the Riding.

Many cases of tuberculosis after reaching a stage of quiescence return to their former employment. If that is entirely unsuitable the case is referred to the Ministry of Labour Resettlement Officer with a view to finding more suitable employment. Disablement Resettlement Officers and chest physicians have generally kept in close touch regarding quiescent and "cured" cases of pulmonary tuberculosis.

PREVALENCE OF INFECTIOUS DISEASES.

The number of infectious diseases notified to the local medical officer of health of the several sanitary districts during 1956 is given in table 7 at the end of this report ; it will be seen that three notifications of diphtheria was received.

The Public Health (Infectious Diseases) Regulations, 1953, which came into operation on the 1st April, 1953, superseded the Public Health (Infectious Diseases) Regulations, 1927, and the Infectious Diseases (London) Regulations 1927. In their general substance and form, the new regulations are similar to the old; that is to say, they require notification of malaria, dysentery, acute primary pneumonia and acute influenzal pneumonia, and provide for preventive steps to be taken against a spread of certain diseases specified in the fourth schedule to the regulations. The provisions about action to be taken by local authorities and medical officers of health against the risk of food poisoning applied under the old regulations to enteric fever and dysentery. They now apply to "typhoid fever, para-typhoid fever and other salmonella infections, dysentery and staphylococcal infection likely to cause food poisoning." The new regulations provide for action to be taken, not only as regards a person suffering from the disease in question, but also a person shown to be a carrier of the disease ; and a person in either class may now be prevented, not only from continuing to work in an occupation connected with food or drink, but also from entering such an occupation.

VENEREAL DISEASES.

The following table gives the summary of the first attendances made by North Riding patients at the hospital named during the years 1948 to 1957 :—

Treatment Centre.	Number of North Riding patients treated for the first time.									
	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957
Darlington General Hospital ..	58	39	55	30	24	23	41	22	27	21
Harrogate General Hospital ..	6	6	11	1	1	2	9	2	1	3
Leeds General Infirmary ..	1	2	6	8	2	8	1	—	—	—
Middlesbrough General Hospital ..	145	167	159	121	112	100	105	90	91	101
Scarborough Hospital	110	108	95	52	74	54	37	32	27	33
Stockton & Thornaby Hospital ..	66	48	33	25	33	26	17	7	29	15
York County Hospital	68	44	27	27	30	41	27	26	38	39
South Shields ..	—	—	—	—	—	4	—	1	—	1
Totals ..	454	414	386	264	276	258	237	180	213	213

LABORATORY FACILITIES.

A comprehensive service is available at the two laboratories of the Public Health Laboratory Service that have been established at Northallerton and Middlesbrough. In addition to undertaking the examination of specimens the directors of the laboratories can help when required in epidemiological field work in co-operation with medical officers of health. The Middlesbrough laboratory in addition to Tees-side, serves the southern part of County Durham and the northern half of the Riding. The Northallerton laboratory serves the remainder of the Riding, except for the Scarborough area which relies on a similar laboratory at Hull and to a lesser degree on a clinical laboratory at the Scarborough Hospital for this service.

The Northallerton laboratory is also a main distributing centre for diphtheria prophylactics and vaccine lymph for immunising persons against diphtheria and smallpox respectively.

SANITARY CIRCUMSTANCES.

Statistical summary of the work carried out during the year by the county health inspectors :—

	Visits	Samples
Visits in relation to works of water supply	155	
Samples of water submitted for examination		535
Visits in relation to works of sewage disposal	138	
Inspections of pasteurising plants and premises	216	
Samples of milk taken from pasteurising plants		474
Bottle rinses taken at pasteurising dairies		365
Visits to school premises (all purposes)	1,556	
Samples of school milk supplies		1,468
Samples of milk from County Children's Homes, etc.		40
Samples of milk taken at Ministry of Health hospital farms		29
Samples of milk submitted for biological examination		
Section 31—Food and Drugs Act, 1955		359
Samples of milk taken in Specified Areas		1,144
Diseases of Animals (Waste Foods) Order, 1957	171	
Refuse disposal—inspection of tips	63	
Swimming baths—water purification	32	
Ministry meetings or Inquiries attended	6	
Miscellaneous visits	126	
	<hr/> 2,463 <hr/>	<hr/> 4,414 <hr/>

The progressive increase of recent years in the number of visits made and samples taken has continued and the duties are now greater than at any time since the services were inaugurated ; this increase has been due mainly to the " specification " of a further area of the Riding under the Milk (Special Designations) (Specified Areas) (No. 2) Order 1957, to inspections and sampling at new schools, and inspections under the Diseases of Animals (Waste Foods) Order, 1957. The additional duties have been carried out by existing staffs.

In carrying out their duties the county health inspectors have been helped by the co-operation received from the directors and staffs of the Public Health Laboratories, the engineering inspectors of the Ministry of Housing and Local Government, inspectors of the River Boards and the majority of the public health inspectors of county districts.

HOUSING

A consolidating Act—the Housing Act, 1957 was enacted during the year with the object of reducing the unwieldy mass of legislation which had accumulated since the special importance and needs of housing were recognized, to manageable proportions. The obligations of county councils in respect of housing in rural districts and of rural district councils to furnish information regarding housing conditions were restated in Sec. 116 et seq. of the new Act. A further enactment of some importance was the Rent Act, 1957, the stated objects of which were, to enable rented properties to be put into and kept in repair and to secure the better use of existing housing accommodation.

The number of houses in the Riding increased to 116,560 ; the number erected by local authorities was 676 and by private persons 1,313. 7,203 houses were inspected during the year, 3,955 required minor repairs and the number requiring structural alterations was 2,673 ; the two latter figures show an increase despite a reduction in the number of inspections, this is probably due to anticipation of and enactment of the Rent Act, 1957.

A statistical summary of the work of county district councils in regard to housing is appended to this report. (see pages 60 and 61).

WATER SUPPLIES.

Seven schemes for the provision of water supplies or improvements to existing supplies were submitted by local authorities during the year. All these schemes were examined by the county health inspectors who reported on the purity and adequacy of the supplies after field investigations ; these reports provided the bases on which the County Council sent observations to the local authorities concerned.

Details of the schemes are as follows :—

Authority	Date Submitted	Scheme	Estimated Cost
			£
Leyburn R.D.C. ..	1-1-57	Link water main—Danby to Hutton Hang	3,200
Masham R.D.C.	14-2-57	Masham, Fearby, Healey.	7,000
do ..	2-7-57	Masham, Fearby, Healey (amended)	14,800
Richmond R.D.C. ..	4-2-57	St. Martin's	1,750
do ..	4-2-57	Hudswell and Slegill	12,950
do ..	5-2-57	Regional water supply scheme—Easby extension	2,580
Stokesley R.D.C. ..	5-7-57	Stainton, Maltby, Thornton.	17,000

The above schemes were necessary but were restricted in scope ; the fact that no regional water schemes were submitted on the lines suggested in Circular 52/56 of the Ministry of Housing and Local Government, must be attributed to a national reluctance on the part of local authorities to proceed with such projects, pending publication of the results of the Water Survey carried out by the aforementioned Ministry in 1956.

During the year, one Public Inquiry and one meeting held by the Ministry of Housing and Local Government to consider schemes of water supply were attended by the county health inspectors who reported thereon : details of local authorities and areas concerned are as follows :—

Authority	Date of Meeting	Scheme
Ryedale Joint Water Board and Pickering U.D.C.	2-7-57	Purchase of the North Eastern Gas Board's water undertaking and the subsequent improvements and extensions of supplies in the Ryedale Joint Water Board's area of supply.
Masham R.D.C. ..	28-8-57	Improvements of the water supply to Masham, Fearby, Healey, High and Low Ellington and Sutton.

The county health inspectors made 155 visits in connection with new sources of water supply or improvements to existing supplies.

During the year the new Scaling Dam was completed, otherwise the activities of water undertakers have been restricted to minor extensions particularly in connection with new building development and to improvements in methods of collection and existing services.

Supervision and sampling of water supplies.

During the year the county health inspectors took 535 samples of water mainly from schools known to have doubtful sources of supply ; further samples were taken from sources of supply forming the bases of new schemes. At the end of the year 37 rural schools were the subject of recommendations regarding boiling of supplies prior to consumption ; the experimental installation of individual tap filters of the infusorial earth type is giving good results and may be extended pending the provision of mains services.

The results of the samples taken are given below :—

Test	No. taken	Satis- factory	Unsatis- factory
Bacteriological examination ..	531	413	118
Chemical analysis ..	4*	2	—

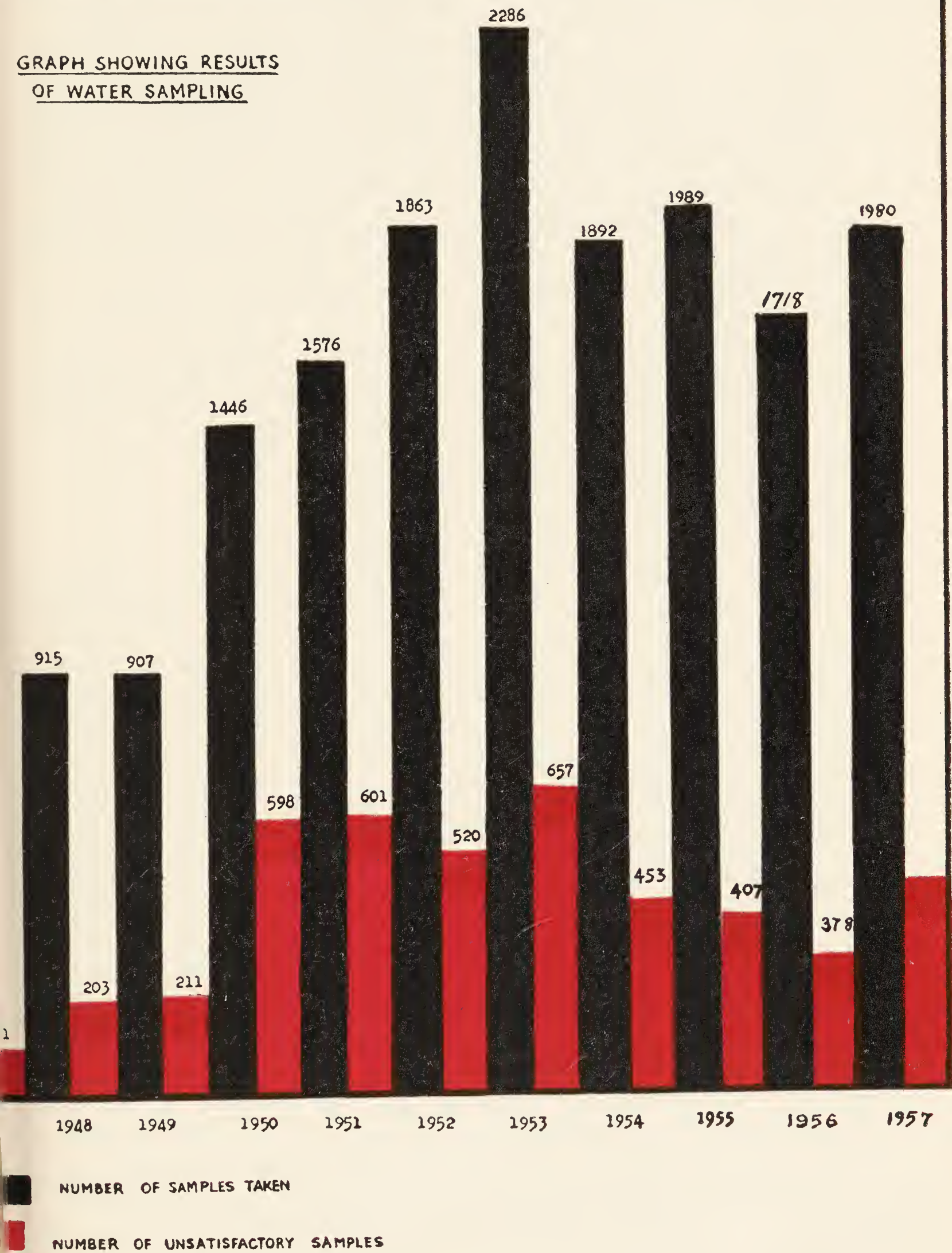
* 2 samples were broken in transit.

Weekly samples of raw and chlorinated water have been taken at the Ryedale Joint Water Board pumping station at East Ness ; these samples have shown a consistently high degree of purity. Tests of water for residual chlorine were also made on a number of chlorinated supplies.

· The number of samples taken for bacteriological examination during the year, by officers of county districts increased by 262 and there was a proportionate increase of 113 in the number of samples found to be unsatisfactory.

The following block graph shows the overall position of sample results and the statistical table gives details of the sampling activities of individual local authorities.

GRAPH SHOWING RESULTS
OF WATER SAMPLING



DISTRICT	Chemical analysis			Bacteriological examination			Mains Supplies
	Total taken	Satisfactory	Unsatisfactory	Total taken	Satisfactory	Unsatisfactory	
URBAN.							
*Eston ..	3	3	—	3	3	—	1
Guisborough ..	1	1	—	8	6	2	5
Loftus ..	—	—	—	3	3	—	1
Malton ..	—	—	—	15	12	3	1
Northallerton ..	1	1	—	38	38	—	1
Pickering ..	1	1	—	101	64	37	1
Redcar Borough ..	38	38	—	191	135	56	3
Richmond Borough	—	—	—	26	26	—	2
Saltburn & Marske	—	—	—	—	—	—	1
Scalby ..	115	115	—	25	25	—	2
Scarborough Borough	15	15	—	403	388	15	2
Skelton & Brotton ..	—	—	—	3	3	—	2
*Thornaby Borough	—	—	—	2	2	—	1
Whitby ..	—	—	—	10	7	3	1
Total Urban ..	174	174	—	828	712	116	24
RURAL.							
Aysgarth ..	—	—	—	29	7	22	17
Bedale ..	2	2	—	15	15	—	1
Croft ..	4	—	4	48	8	40	3
Easingwold ..	—	—	—	74	54	20	2
Flaxton ..	—	—	—	11	10	1	2
Helmsley ..	—	—	—	92	63	29	9
Kirkbymoorside ..	—	—	—	134	123	11	11
Leyburn ..	2	2	—	18	7	11	16
Malton ..	—	—	—	22	18	4	1
Masham ..	7	6	1	30	20	10	7
Northallerton ..	—	—	—	12	6	6	2
Pickering ..	—	—	—	42	37	5	11
Reeth ..	—	—	—	54	27	27	15
Richmond ..	3	1	2	28	24	4	3
Scarborough ..	2	2	—	281	207	74	7
Startforth ..	1	1	—	39	26	13	7
Stokesley ..	—	—	—	69	37	32	2
Thirsk ..	5	3	2	25	18	7	6
Wath ..	—	—	—	61	45	16	10
Whitby ..	5	5	—	68	25	43	19
Total Rural ..	31	22	9	1152	777	375	151
Administrative County	205	196	9	1980	1489	491	175

* Supply provided by Tees Valley Water Board.

A number of supplies are inadequate and unsatisfactory at source, the majority rely on chlorination as the only precaution against contamination, hence the need for regular sampling at the point of consumption.

SEWERAGE AND SEWAGE DISPOSAL

Ten schemes for sewerage and sewage disposal were submitted during the year, of these three were for extension or reconstruction of existing works and seven for new sewerage and/ or sewage disposal facilities. All the schemes were examined by the county health inspectors whose reports formed the subject of county council observations to county district councils.

Details of local authorities and areas concerned together with estimated costs of the proposals are given in the following schedule :—

Authority	Date Submitted	Scheme	Estimated Cost
			£
Easingwold R.D.C. . .	9-3-57	Husthwaite (revised)	18,053
Flaxton R.D.C. . .	8-3-57	New Earswick	39,225
do . .	22-3-57	Skelton and Rawcliffe—extensions to sewage disposal works (additional)	16,950
do	27-3-57	Murton and Osbaldwick—extension to sewage disposal works (additional)	14,235
do	18-5-57	Hilbra Estate (Haxby Parish)	2,652
Leyburn R.D.C. . .	2-7-57	Bellerby	12,066
do	2-7-57	Wensley	7,523
Richmond R.D.C.	11-12-57	Middleton Tyas—reconstruction of sewage disposal works	6,500
Thirsk R.D.C. . .	28-11-57	Kirby Hill, Langthorpe, Milby	43,750
Wath R.D.C.	12-1-57	Baldersby	16,306

Four meetings convened by the Minister of Housing and Local Government to consider new proposals for sewerage and sewage disposal facilities, were attended by the county health inspectors.

Details of the authorities concerned and the schemes under review are as follows :—

Authority	Date of Meeting	Scheme
Guisborough U.D.C.	26-3-57	Sewage disposal works for Dunsdale village.
Flaxton R.D.C.	27-8-57	Extension of sewage disposal works at (a) Murton and Osbaldwick. (b) Skelton and Rawcliffe.
Richmond R.D.C. . .	25-7-57	Provision of new sewage disposal works for Catterick Village.
Whitby R.D.C.	3-7-57	Sewerage and Sewage disposal—Newholm.

The county health inspectors also made regular inspections of plants which have been the subject of grants under the Rural Water Supplies and Sewerage Acts ; 138 visits were made for this purpose and by and large the plants were well maintained and operating satisfactorily.

During the year schemes for the following villages were commenced :—

Dunsdale (Guisborough U.D.).

Aiskew and Bedale (Bedale R.D.).

Sand Hutton (Flaxton R.D.).

Slingsby (Malton R.D.).

North Cowton and Eppleby (Richmond R.D.).

Stainsacre and Lythe (Whitby R.D.).

The main other activities of local authorities have been in connection with sewer extensions to serve areas of new building development.

Progress in the provision of sewerage and sewage disposal facilities in many areas, now awaits improvements in water supplies ; this applies particularly to the Dales area of the Riding.

REFUSE COLLECTION AND DISPOSAL

The county health inspectors made sixty-three special inspections of refuse disposal tips during the year. For obvious reasons, i.e. concentration of population resulting in short hauls and more economical collection and supervision, the tips of urban authorities were better maintained. In the rural areas the difficulties from all aspects are greater and collections are less frequent ; far too often one sees deposits of refuse near farms in rural areas. Apart from the risk to health these are unsightly and are an offence under existing public health legislation.

During the past year, ten urban authorities disposed of refuse by controlled tipping ; two by uncontrolled tipping and one by incineration. Eleven rural authorities have in operation some form of controlled tipping ; seven have partially controlled tipping, one has uncontrolled tips and one uses incineration.

A list giving details of the methods of disposal of refuse, frequency of collection and estimated cost, in operation by local authorities in the Riding is appended.

District	Estimated cost of service	Method of refuse disposal—1957	Frequency of collection, improvement to service, etc.
URBAN.	£		
Eston ..	19,918	Controlled tipping	Weekly collection
Guisborough ..	5,500	do ..	do
Loftus ..	4,434	do ..	do
Malton ..	3,584	Partially controlled	do (Remote rural premises—monthly)
Northallerton ..	3,163	Uncontrolled tipping	do
			Bullamoor and Hailstone Moor—3 weekly collection.
Pickering ..	1,593	do ..	Weekly collection in town area.
			Quarterly collection at Stape and Bean Sheaf.
Redcar Borough ..	19,504	Controlled tipping	Weekly collection.
Richmond Borough	3,589	do	do
Saltburn & Marske	5,175	do ..	do
Scalby ..	3,927	do ..	do (Outlying farms—fortnightly).
Scarborough			
Borough ..	49,770	do ..	do
Skelton & Brotton	5,453	do ..	do
Thornaby Borough	8,475	do ..	do
Whitby ..	9,238	Incineration ..	do
RURAL.			
Aysgarth ..	855	Partially controlled	Fortnightly collection.
Bedale ..	4,254	Controlled tipping	Bins collected weekly in Bedale and Aiskew.
			Fortnightly collections in other areas.
			Ashpits cleared every 12 weeks.
Croft ..	862	Partially controlled	Fortnightly collection. Over Dinsdale—monthly.
Easingwold ..	4,000	Controlled tipping	Weekly collection—Easingwold, Linton
			R.A.F. Station and East Moor Polish Hostel.
			Fortnightly collection in other areas.
Flaxton ..	5,459	Partially controlled	Weekly collection.
Helmsley ..	1,470	do ..	Fortnightly collection.
Kirkbymoorside ..	1,878	do ..	Weekly collection in Kirkbymoorside,
			Nawton, Wombledon, Kirby Mills and Welburn.
			Monthly in Farndale. Fortnightly elsewhere.
Leyburn ..	2,295	Controlled tipping	Weekly collection—Leyburn and Middleham.
			Fortnightly collection—remainder of area.
Malton ..	700	do ..	Collection monthly.
Masham ..	850	do ..	Weekly collection—Masham.
			Monthly collection—villages.
Northallerton ..	4,375	Partially controlled	Weekly collection—Ainderby Steeple,
			Morton-on-Swale, Thrintoft, Brompton and Romanby.
			Fortnightly collection—other areas.
			Ashpits emptied at 2 monthly intervals.
Pickering ..	861	Uncontrolled tipping	Every 3 weeks.
Reeth ..	1,200	Partially controlled	Weekly collection. Farms monthly.
Richmond ..	2,876	Controlled tipping	Weekly collection.
Scarborough ..	1,322	do ..	Fortnightly collection from large communities
			Monthly collection from small communities
Startforth ..	2,924	Controlled tipping	Weekly collection (Outlying parts 2–4 weeks).
Stokesley ..	14,530	do ..	do
Thirsk ..	10,775	do ..	Weekly collection from bins and pails.
			Monthly collection from privy middens and ashpits.
Wath ..	868	do ..	Fortnightly collection.
Whitby ..	7,014	Uncontrolled 82%	Weekly collection in 30 villages.
		Incineration 18%	Fortnightly collection in 22 villages.

NUISANCES.

The decrease in the number of inspections made by local authorities, to which I referred in my 1956 Report, continues, there being a further reduction of 1,436 during 1957. This progressive decrease is the direct result of improvements in environmental hygiene throughout the Riding during recent years, particularly in the field of housing, although nuisances arising from defects in houses as distinct from other causes are not included in the statistical table below which gives details of the work done by local authorities under Part III of the Public Health Act, 1936.

NUISANCE INSPECTIONS (other than Housing inspections).

DISTRICT	No. of inspections	Nuisances found	Informal notices served	* Complied with	Statutory notices served	* Complied with	Legal proceedings
URBAN.							
Eston ..	1732	1792	757	665	14	13	—
Guisborough ..	413	314	255	249	2	2	—
Loftus ..	174	53	53	56	—	—	—
Malton ..	34	20	20	20	—	—	—
Northallerton ..	16	19	16	16	—	—	—
Pickering ..	32	19	17	17	—	—	—
Redcar Borough† ..	6700	6221	6002	5980	—	—	—
Richmond Borough ..	19	39	19	13	—	—	—
Saltburn & Marske ..	135	38	25	25	—	—	—
Scalby ..	75	31	31	31	—	—	—
Scarborough Borough	1420	234	184	163	50	37	—
Skelton & Brotton ..	1540	347	347	330	—	—	—
Thornaby Borough ..	786	662	442	379	62	90	—
Whitby ..	144	46	29	29	—	—	—
RURAL.							
Aysgarth ..	57	29	5	5	—	—	—
Bedale ..	36	33	33	30	—	—	—
Croft ..	9	9	9	9	—	—	—
Easingwold ..	136	129	95	86	2	2	—
Flaxton ..	48	33	29	26	3	3	—
Helmsley ..	—	—	—	—	—	—	—
Kirkbymoorside ..	40	26	—	—	—	—	—
Leyburn ..	45	36	30	27	—	—	—
Malton ..	86	23	6	6	—	—	—
Masham ..	4	3	—	—	—	—	—
Northallerton ..	277	252	257	250	4	1	—
Pickering ..	4	4	4	2	—	—	—
Reeth ..	27	14	2	2	—	—	—
Richmond ..	55	55	55	55	—	—	—
Scarborough ..	43	26	26	27	—	—	—
Startforth ..	79	23	21	19	—	—	—
Stokesley ..	58	71	39	38	1	1	—
Thirsk ..	138	65	26	19	—	—	—
Wath ..	34	6	6	6	—	—	—
Whitby ..	200	84	30	30	—	—	—
Totals ..	14,596	10,756	8,870	8,610	138	149	—

* These figures include notices pending at the end of 1956.

† These figures include nuisances found during housing inspections, which are not included in the returns of other authorities.

MILK SUPPLIES.

Milk (Special Designation) (Pasteurised and Sterilised Milk)
Regulations, 1949—1953.

Five licences to operate pasteurising plants were current during the year, four in respect of Holder Type processes and one for a High Temperature Short Time process.

The county health inspectors made 216 visits to the licensed premises for the purpose of sampling, inspection of premises and temperature recording charts and checking thermometers. 474 samples of milk were taken for methylene blue reduction and phosphatase tests, with the following results :—

Plant No.	Type	No. of Inspections	No. of samples taken	Phosphatase test		Methylene Blue test		Biological examination	
				Passed	Failed	Passed	Failed	Negative	Positive
1	Holder	23	67	66	1	55	—	1	—
2	do	36	108	105	3	101	—	2	—
3	do	51	105	103	2	93	—	—	—
4	do	50	88	86	2	82	—	2	—
5	H.T.S.T.	56	106	103	3	106	—	—	—
TOTALS ..		216	474	463	11	437	—	5	—

Samples failing the phosphatase test represent only 2·3% of the number taken and these were submitted to biological examination as a further check ; all gave negative results.

The safety factor of milk which is increased by the pasteurising process can be reduced and possibly nullified by lack of cleanliness of containers i.e. milk bottles ; to minimize this risk bottles have been taken from the bottle washing plants at pasteurising depots, at least once a month and submitted to rinse tests. Since 1952, I have been able to report a progressive reduction in the percentage of bottles failing the rinse test ; unfortunately during the past year the percentage has risen almost threefold to 15·0% due mainly to a deterioration in the methods of one producer whose individual percentage failure has been 43·1%. The record of the remaining four producers showed a percentage failure of 5·2% as compared with 5·13% for the year 1956.

The results of bottle rinse tests at each licensed plant are given below :—

Dairy		Method of bottle cleansing	No. of bottles taken	Satisfactory	Unsatisfactory
No. 1	..	Machine ..	48	46	2
No. 2	..	do ..	95	54	41
No. 3	..	do ..	72	66	6
No. 4	..	do ..	72	72	—
No. 5	..	do ..	78	66	6
Totals ..			365	304	55

Food and Drugs Act, 1955.

Milk (Special Designation) (Specified Areas) Orders, 1954 and 1956.

Under the above legislation Specified Area No. 2 Order 1957 became operative from 25th November, 1957 ; this defined the rural districts of Croft and Stokesley as areas in which the retail sale of milk must be restricted to milk to which a "special designation" is applicable, i.e. Sterilised, Pasteurised or T.T. milk. As a result of this further Order, the eastern part of the Riding comprising two Boroughs, ten urban districts and eight rural districts, in addition to two adjoining county boroughs is now a "specified area" ; this area in relation to the North Riding as a whole, is shown on the accompanying map. Adequate supplies of "special designated" milk are available except in a few remote rural localities ; "consents" for the supply of non-designated milk, which are discretionary under the Order, have therefore been few in number. Similarly, contraventions of the Orders have been restricted to a small number of retailers who, at the onset, were retailing non-designated milk through ignorance of legislation.

During the year the county health inspectors took 1,144 samples of milk ; a summary of the results of statutory tests and biological examinations is given herewith :—

Grade	No. taken	Meth : Blue test		Phosphatase test		Turbidity test		Tubercle bacilli		Brucella abortus	
		Pass	Fail	Pass	Fail	Pass	Fail	Neg.	Pos.	Neg.	Pos.
Pasteurised	662	627	5	654	7	—	—	3	—	3	—
Sterilised	142	—	—	—	—	142	—	—	—	—	—
Tuberculin Tested	296	157	43	—	—	—	—	267	—	244	11
Non-designated	44	16	13	—	—	—	—	40	—	40	—

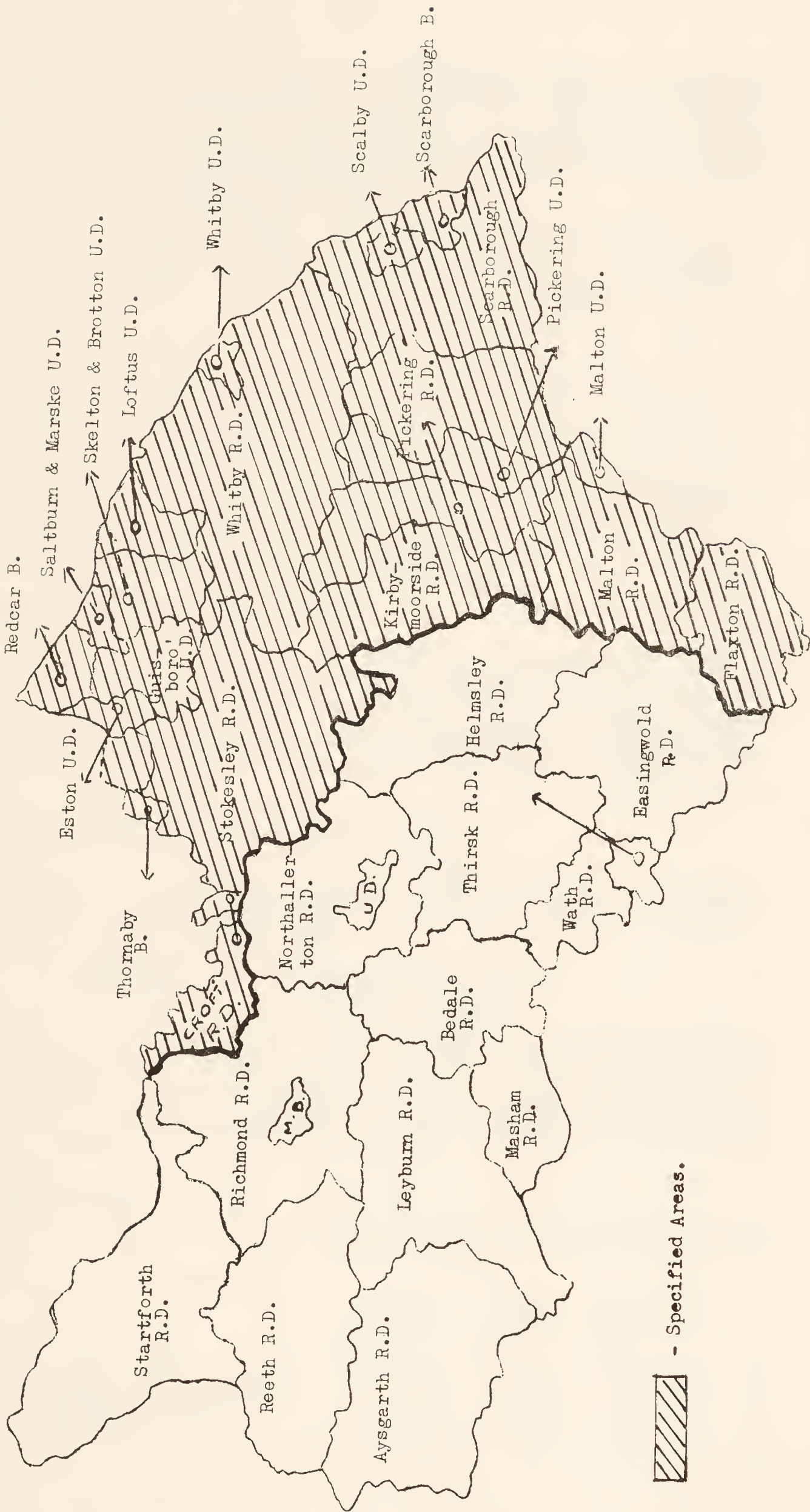
The standard of milk retailed in the Riding would appear from the above results, to have been satisfactory, as the seven samples failing the phosphatase test were produced at dairies not licensed by the county council. It is interesting to note that the eleven samples showing the presence of brucella abortus were from Tuberculin Tested supplies : this emphasises the need for biological examination of milk from tuberculin tested herds.

Food and Drugs Act, 1955.

Section 31—Milk-borne infections diseases.

The consumption of raw milk, i.e. non-designated and tuberculin tested milk has declined rapidly in recent years owing to increased sales of sterilised and pasteurised milk, but the risk of milk-borne infection of bovine origin will continue so long as untreated milk is available for human consumption ; that being so, it is essential to take samples of raw milk for biological examination in order to safeguard consumers.

NORTH RIDING OF YORKSHIRE



During the year 359 samples of raw milk were taken by the county health inspectors, 351 of which were submitted to biological examination. The number of samples taken is not considered to be sufficient for adequate supervision but the maximum sampling compatible with laboratory facilities was carried out, with the following results :—

No. taken	Tubercle bacilli		Brucella abortus		No. of samples not examined
	Negative	Positive	Negative	Positive	
359	351	—	336	12	8

The absence of any positive results from biological examination for tubercle bacilli is indicative of the success of the recent measures for the elimination of bovine tuberculosis ; unfortunately brucella abortus infection appears to be widespread as infection was found in the rural areas of Aysgarth, Bedale, Helmsley, Northallerton, Stokesley, and Thirsk. In all cases where infection is found, the Divisional Veterinary Officer of the Ministry of Agriculture and the District Medical Officer are notified.

Milk Sampling at Hospital Dairy Farms.

At the request of the Ministry of Health, milk produced at hospital farms was sampled in accordance with their scheduled requirements ; 27 samples were taken by the county health inspectors from Clifton Hospital Farm and Fairfield Sanatorium Farm. All samples passed the methylene blue test and gave negative results for the presence of tubercle bacilli and brucella abortus.

Milk Supplies to Children's Homes and Nurseries.

Pasteurised milk supplied to County Children's Homes and Nurseries was sampled by the county health inspectors at regular intervals, 40 samples were tested, with the following results :—

Phosphatase test 40 passed, none failed
Methylene blue test 37 passed, two failed.

One sample was not submitted to the methylene blue reduction test owing to atmospheric shade temperature in excess of 65°F. Samples which failed the methylene blue test were produced at a pasteurising plant outside the county administrative area ; these failures were reported to the supervising authority concerned, for investigation.

School Milk Supplies.

The grades of milk supplied to schools during the past three years are as follows :—

No. of schools supplied with :

	1955	1956	1957
Pasteurised milk	294	341	348
Tuberculin Tested Milk ..	43	44	46
Non-designated milk	25	25	19
Dried milk	19	7	6

From the foregoing information it will be seen that 83% of the schools are supplied with heat-treated milk and 15.5% with raw milk. Untreated liquid milk is only supplied in rural areas where pasteurised milk is not readily available ; 10.9% of the schools are supplied with tuberculin tested milk and 4.5% with non-designated milk ; the latter grade of milk is supplied only in remote rural areas where no other grades are available. It is not normally regarded as suitable for schools, but there are difficulties in substituting dried milk. All non-designated supplies are sampled at frequent intervals for biological examination.

The county health inspectors made 1,556 visits and took 1,468 samples of milk during the year ; the results of phosphatase tests, methylene blue tests and biological examinations were as follows :—

Grade	No. taken	Methylene Blue test		Phosphatase test		Biological examination		Brucella abortus	
		Passed	Failed	Passed	Failed	Tb. Neg.	Tb. Pos.	Neg.	Pos.
Pasteurised ..	1290	1182	31	1241	43	5	—	5	—
Tuberculin Tested	101	14	4	—	—	101	—	99	2
Non-designated	77	—	—	—	—	76	1	69	5

Discrepancies between the number of samples taken and tested are due to inability to test owing to atmospheric shade temperature in excess of 65° F. ; souring of milk and/or death of guinea pig from intercurrent infection prior to completion of biological examination.

Of the 43 samples failing the phosphatase test for pasteurised milk, 16 were from milk pasteurised at plants outside the Riding ; the remaining 27 samples were from milk pasteurised at a plant within the Riding and licensed by the County Council. As 26 of the 27 sample failures from this plant were reported by one laboratory, results which were inconsistent with those obtained from another laboratory, a meeting with the directors of the laboratories was arranged ; it is significant that only one sample failed the phosphatase test after this meeting was held, until the end of the year. In the circumstances any comment adverse or otherwise on the state of the milk from the standpoint of efficient heat treatment, would be purely speculative.

In all cases of phosphatase test or methylene blue test failure, the school milk supply was re-sampled without delay and where possible, investigations were made at the source of production.

Details of samples giving positive results on biological examination for tubercle bacilli and brucella abortus were notified to the District Medical Officers and the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food. In all cases, alternative sources of supply were arranged or the milk was heat-treated until the animals responsible for the infection were traced and removed from the herd.

The animal affected by tuberculosis was slaughtered under the statutory provisions of the Tuberculosis Order.

Where *brucella abortus* was found in school milk, the county health inspectors took samples from individual animals for Ring test ; 78 samples were taken, of which 16 gave positive results. This action was considered essential to speed up investigation and the resumption of school milk supplies.

INSPECTION AND SUPERVISION OF FOOD.

Despite difficulties in interpretation of certain provisions of the Food Hygiene Regulations due to the wide differences in the circumstances of food premises i.e. the travelling shop, small village shop and large store, etc., steady progress has continued throughout the year in enforcement of the Regulations. Inspection of premises has increased and compliance with the requirements from a structural standpoint has been obtained, for the most part, without the need for statutory action. The position regarding food handling has not, unfortunately, kept pace with the structural improvement : many local authorities have done active work by lectures and distribution of leaflets, etc., towards education of employees in food shops, but it is evident from inspection and general observation that the methods and habits of years are difficult to overcome. There is need to shift the emphasis from premises to handlers and in addition to the work of the official in education of the food handler, education of the general public is necessary so that the most potential corrective may be enlisted, namely, consumer resistance to bad food handling.

There was an increase in the number of food poisoning notifications during the year ; 60 cases were notified as against 47 in 1956.

The standard of food handling in school kitchens has been well maintained this is reflected by the fact that no outbreak of food poisoning attributable to school meals has occurred during the year.

One suspected outbreak of food poisoning at a school was thought to be due to milk consumed by the children but on investigation no food poisoning pathogens were isolated. As this outbreak affected only a very small number of children and coincided with medical inspection it may have been psychosomatic in origin.

Food and Drugs Act.

Sampling under the Food and Drugs Act for adulteration, inferior quality and false description, is carried out by the Weights and Measures Inspectors, and I am indebted to the Chief Inspector (Mr. W. C. Harrison) for the following statistics :—

Total number of Samples taken	Number Genuine	Number Adulterated	Number Inferior	False Description
783	762	13	8	—

The following table shows the number and type of samples taken during the year of which some were found to be adulterated or of inferior standard.

Type of sample	Samples taken	Number adulterated	Number inferior	False description
Dried Mint	2	1	—	—
Dried Sage	5	1	—	—
Fishcakes	13	4	—	—
Lard	24	1	—	—
Lemon Squash	6	1	—	—
Meat and Potato Pasties ..	1	1	—	—
Milk	364	3	8	—
Potted Meat	1	1	—	—

HOUSING

DISTRICT	Total Number of houses in district	Number inspected during year	Number found to be satisfactory in all respects	Number with minor defects only	Number requiring repairs or structural alterations
A.—URBAN.					
1. Eston ..	10,218	819	—	757	9
2. Guisborough ..	2,944	234	48	140	33
3. Loftus ..	2,657	191	6	158	27
4. Malton ..	1,347	160	91	13	28
5. Northallerton ..	2,207	107	—	—	90
6. Pickering ..	1,467	33	—	16	17
7. Redcar ..	8,851	—	41	108	120
8. Richmond ..	1,678	356	48	183	223
9. Saltburn & Marske ..	3,419	45	—	9	32
10. Scalby ..	2,412	200	151	15	20
11. Scarborough ..	13,743	135	1	87	97
12. Skelton & Brotton ..	4,182	1,101	729	347	24
13. Thornaby-on-Tees ..	6,603	446	208	82	146
14. Whitby ..	3,832	40	—	—	—
Total Urban ..	65,560	3,867	1,323	1,915	866
B.—RURAL.					
1. Aysgarth ..	1,247	49	16	4	16
2. Bedale ..	2,498	180	1	—	15
3. Croft ..	670	8	—	—	—
4. Easingwold ..	3,292	39	32	2	3
5. Flaxton ..	7,102	540	300	82	72
6. Helmsley ..	1,425	25	—	—	8
7. Kirkbymoorside ..	1,470	66	50	15	—
8. Leyburn ..	1,976	726	68	39	28
9. Malton ..	1,856	58	—	—	30
10. Masham ..	547	129	28	65	36
11. Northallerton ..	2,841	98	—	8	10
12. Pickering ..	1,820	41	—	7	34
13. Reeth ..	982	148	17	80	63
14. Richmond ..	3,274	59	2	4	52
15. Scarborough ..	2,608	78	22	56	—
16. Startforth ..	1,420	340	39	204	72
17. Stokesley ..	6,668	7	61	1,390	1,077
18. Thirsk ..	4,124	305	30	31	105
19. Wath ..	719	171	78	33	32
20. Whitby ..	4,461	269	46	20	154
Total Rural ..	51,000	3,336	790	2,040	1,807
Administrative County ..	116,560	7,203	2,113	3,955	2,673

Number suitable for improvement under Housing Acts	Number unfit in all respects	Number of Houses erected		Housing Act, 1949. Sec. 20.			
		By Local Authority	By Private Persons	Number of applications received	Number of Grants made	Number of Grants refused	Number of Grants pending
7	53	73	66	5	4	1	3
10	3	7	41	10	8	—	1
—	—	24	—	10	10	—	—
28	12	20	9	7	7	—	—
10	7	—	21	11	7	1	—
14	1	16	2	9	9	—	—
120	3	—	70	—	—	—	—
271	85	46	5	7	6	1	—
2	2	49	89	2	1	—	1
—	14	14	71	—	—	—	—
84	37	129	56	88	84	—	4
—	1	20	18	19	17	—	2
—	59	23	19	18	16	2	—
—	40	46	37	18	11	2	5
546	317	467	504	204	180	7	16
23	13	—	2	9	9	—	—
50	114	20	14	22	22	—	—
8	—	—	11	8	8	—	—
3	2	33	25	26	28	3	4
72	86	26	356	25	14	11	—
—	17	—	2	—	—	—	—
—	1	—	3	16	16	—	—
35	12	—	3	14	22	3	—
10	18	4	7	21	21	—	—
4	36	—	1	—	—	—	—
76	4	—	18	66	66	—	2
27	4	—	2	27	27	—	—
31	—	—	—	8	5	2	1
4	—	—	10	34	29	2	3
—	—	—	17	30	29	5	—
—	25	—	5	3	5	—	—
—	531	48	304	33	32	1	—
95	44	64	17	45	45	—	—
21	7	7	2	10	10	—	—
93	49	7	10	40	40	—	—
552	963	209	809	437	428	27	10
1,098	1,280	676	1,313	641	608	34	26

TABLE 1.

Number of Births in each District during 1957.

DISTRICT.	Estimated mid-year home population 1957.	Total live births.	Illegiti- mate live births.	Birth- rate per 1,000 popu- lation.	Excess of births over deaths. (Natural increase)	Natural increase per 1,000 popu- lation.
A.—URBAN.						
1. Eston ..	34,890	838	48	24.0	501	14.4
2. Guisborough ..	9,630	198	3	20.6	94	9.8
3. Loftus ..	7,660	135	2	17.6	36	4.7
4. Malton ..	4,160	58	2	13.9	7	1.7
5. Northallerton ..	6,160	90	4	14.6	19	3.1
6. Pickering ..	4,200	60	3	14.3	1	.2
7. Redcar ..	28,310	463	27	16.4	136	4.8
8. Richmond ..	6,040	125	6	20.1	63	10.4
9. Saltburn and Marske	9,570	184	6	19.2	91	9.5
10. Scalby ..	6,470	67	2	10.4	— 29	..
11. Scarborough ..	43,510	565	45	13.0	— 92	..
12. Skelton and Brotton	12,810	204	7	15.9	44	3.4
13. Thornaby-on-Tees	23,910	507	21	21.2	286	12.0
14. Whitby ..	11,480	195	8	17.0	1	.1
Total Urban ..	208,800	3,689	184	17.7	1,158	5.5
B.—RURAL						
1. Aysgarth ..	3,390	40	3	11.8	— 17	..
2. Bedale ..	8,390	145	4	17.3	59	7.0
3. Croft ..	2,320	34	2	14.7	9	3.9
4. Easingwold ..	11,560	167	3	14.4	64	5.5
5. Flaxton ..	23,030	350	10	15.2	94	4.1
6. Helmsley ..	5,360	55	4	10.3	1	.2
7. Kirbymoorside ..	4,930	62	1	12.6	3	.6
8. Leyburn ..	6,380	89	4	13.9	23	3.6
9. Malton ..	5,550	80	2	14.4	26	4.7
10. Masham ..	1,630	21	..	12.9	— 6	..
11. Northallerton ..	8,630	141	6	16.3	49	5.7
12. Pickering ..	5,090	71	2	13.9	3	.6
13. Reeth ..	1,970	26	1	13.2	2	1.0
14. Richmond ..	27,610	467	12	16.9	287	10.4
15. Scarborough ..	7,630	96	10	12.6	3	.4
16. Startforth ..	5,120	74	7	14.5	31	6.1
17. Stokesley ..	19,660	364	8	18.5	171	8.7
18. Thirsk ..	14,080	207	7	14.7	65	4.6
19. Wath ..	3,830	65	3	17.0	39	10.2
20. Whitby ..	11,640	157	6	13.5	— 22	..
Total Rural ..	177,800	2,711	95	15.2	884	5.0
Administrative County	386,600	6,400	279	16.6	2,042	5.3
Totals for 1956 ..	387,000	6,254	245	16.2	1,835	4.7

TABLE No. 2.

Number of Deaths in each District during 1957.

DISTRICT.	Estimated mid-year home population, 1957	Total deaths.	Death-rate per 1,000 population.	Deaths under 1 year.	Total infantile mortality per 1,000 live births.	Illegitimate children, deaths under 1 year.	Illegitimate children, deaths under 1 year per 1,000 illegitimate live births.
A.—URBAN.							
1. Eston ..	34,890	337	9.7	28	33.4	4	83.3
2. Guisborough ..	9,630	104	10.8	7	35.4	..	..
3. Loftus ..	7,660	99	12.9	3	22.2	..	..
4. Malton ..	4,160	51	12.3	1	17.2	..	..
5. Northallerton ..	6,160	71	11.5	1	11.1	..	..
6. Pickering ..	4,200	59	14.0	..	..	..	..
7. Redcar ..	28,310	327	11.6	11	23.8	3	111.1
8. Richmond ..	6,040	62	10.3	5	40.0	..	..
9. Saltburn and Marske ..	9,570	93	9.7	2	10.9	..	..
10. Scalby ..	6,470	96	14.8	3	44.8	..	..
11. Scarborough ..	43,510	657	15.1	15	26.5	2	44.4
12. Skelton and Brotton ..	12,810	160	12.5	7	34.3	..	..
13. Thornaby-on-Tees ..	23,910	221	9.2	15	29.6	1	47.6
14. Whitby ..	11,480	194	16.9	7	35.9	1	125.0
Total Urban ..	208,800	2,531	12.1	105	28.5	11	59.8
B.—RURAL							
1. Aysgarth ..	3,390	57	16.8	1	25.0	1	333.3
2. Bedale ..	8,390	86	10.3	1	6.9	..	..
3. Croft ..	2,320	25	10.8	2	58.8	..	..
4. Easingwold ..	11,560	103	8.9	6	35.9	..	..
5. Flaxton ..	23,030	256	11.1	6	17.1	..	..
6. Helmsley ..	5,360	54	10.1	..	..	..	..
7. Kirbymoorside ..	4,930	59	12.0	1	16.1	..	..
8. Leyburn ..	6,380	66	10.3	1	11.2	..	..
9. Malton ..	5,550	54	9.7	2	25.0	..	..
10. Masham ..	1,630	27	16.6	3	142.9	..	..
11. Northallerton ..	8,630	92	10.7	3	21.3	1	7.1
12. Pickering ..	5,090	68	13.4	3	42.3	..	..
13. Reeth ..	1,970	24	12.2	..	..	..	..
14. Richmond ..	27,610	180	6.5	14	30.0	..	..
15. Scarborough ..	7,630	93	12.2	1	10.4	..	..
16. Startforth ..	5,120	43	8.4	1	13.5	..	..
17. Stokesley ..	19,660	193	9.8	10	27.5	1	125.0
18. Thirsk ..	14,080	142	10.1	4	19.3	..	..
19. Wath ..	3,830	26	6.8	2	30.8	..	..
20. Whitby ..	11,640	179	15.4	1	25.5	..	..
Total Rural ..	177,800	1,827	10.3	65	24.0	3	31.6
Administrative County ..	386,600	4,358	11.3	170	26.6	14	50.2
Totals for 1956 ..	387,000	4,419	11.4	160	25.6	7	28.6

TABLE 3.

Deaths according to Age-Groups, 1957.

CAUSES OF DEATH.	Sex	AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS							
		All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-		
ALL CAUSES	M	1287	72	6	3	16	58	359	345	428	964	37	6	12	18	51	206		
	F	1244	33	6	9	8	40	216	323	609	863	28	6	5	4	22	142		
1. Tuberculosis, respiratory	M	7	..	..	..	..	1	4	2	..	13	..	..	..	..	..	6
	F	5	..	..	..	1	2	..	1	1	1	1	..	..	..	..	..
2 Tuberculosis, other	M	..	..	..	..	..	..	..	..	..	3	..	..	..	..	1	..
	F	2	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..
3 Syphilitic disease	M	6	..	..	..	..	..	2	4	..	2	..	..	..	..	..	1
	F	5	..	..	..	..	..	..	3	2	2	..	..	..	..	..	..
4 Diphtheria	M	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5 Whooping cough	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6 Meningococcal infections	M	2	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..
	F	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
7 Acute poliomyelitis	M	1	..	1	..	..	..	..	..	..	2	1	..	..	..	1	..
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8 Measles	M	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..
	F	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..
9 Other infective and parasitic diseases	M	4	..	..	1	..	..	3	..	..	2	..	..	1	..	..	..
	F	1	..	..	..	1	..	..	..	..	2	..	1	..	..	..	..
10 Malignant neoplasm, stomach	M	45	..	..	..	..	1	16	19	9	29	..	..	..	..	1	9
	F	43	..	..	..	..	2	14	11	16	19	..	..	..	..	2	5
11 Malignant neoplasm lung, bronchus	M	66	..	..	..	..	4	42	14	6	35	..	..	..	1	1	20
	F	17	..	..	..	..	1	9	5	2	5	..	..	..	..	..	2
12 Malignant neoplasm breast	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	34	..	..	..	..	1	18	7	8	24	..	..	..	..	1	9
13 Malignant neoplasm uterus	F	17	..	..	..	..	1	11	1	4	15	..	..	..	..	..	7
14 Other malignant and lymphatic neoplasms	M	110	..	..	..	..	4	35	40	31	80	..	1	..	..	9	16
	F	85	..	..	..	..	4	24	33	24	67	..	..	..	..	..	24
15 Leukaemia, aleukaemia	M	1	..	..	..	..	..	..	..	1	4	..	..	..	..	1	1
	F	3	..	1	..	..	1	..	1	..	4	..	..	..	..	1	2
16 Diabetes	M	8	..	..	..	..	1	..	5	2	..	..	..	..	..	..	..
	F	9	..	..	..	..	..	1	6	2	13	..	..	..	..	..	2
17 Vascular lesions of nervous system	M	166	..	..	..	1	3	33	43	86	117	2	..	1	..	3	18
	F	225	..	..	..	..	3	28	66	128	156	..	..	..	..	1	23
18 Coronary disease, angina	M	253	..	..	..	..	9	101	79	64	201	..	..	..	..	5	58
	F	170	..	..	..	..	2	30	65	73	126	..	..	..	..	2	19
19 Hypertension with heart disease	M	21	..	..	..	..	2	5	7	7	20	..	..	..	..	..	3
	F	38	..	..	..	..	..	10	13	15	17	..	..	..	..	..	3
20 Other heart disease	M	188	..	..	..	1	5	21	41	120	154	..	..	..	1	2	15
	F	291	..	..	1	..	6	17	48	219	174	..	..	..	..	1	15
21 Other circulatory disease	M	46	..	..	..	..	2	10	13	21	46	..	..	..	..	1	5
	F	44	..	..	..	..	3	7	11	23	43	..	..	..	..	..	3
22 Influenza	M	17	..	..	..	..	3	8	4	2	14	..	..	3	2	1	2
	F	18	..	..	..	3	2	2	9	2	8	..	1	2	..	1	1
23 Pneumonia	M	44	11	1	..	..	..	7	9	16	26	3	1	2	1	1	6
	F	34	5	2	..	..	..	8	3	16	26	6	1	..	2	1	4
24 Bronchitis	M	76	..	..	..	..	2	29	26	19	38	1	1	..	..	1	11
	F	20	..	1	..	..	..	3	5	11	20	..	..	..	..	..	5
25 Other diseases of respiratory system	M	6	..	..	..	..	1	2	2	1	6	..	..	..	..	1	3
	F	5	..	..	..	..	..	3	..	2	4	..	..	..	..	..	1
26 Ulcer of stomach and duodenum	M	18	..	..	..	..	2	6	6	4	10	..	..	..	..	1	3
	F	7	..	..	..	..	1	3	2	1	2	..	..	..	..	..	..
27 Gastritis, enteritis and diarrhoea	M	3	..	..	1	1	..	..	1	..	5	1	..	..	..	..	1
	F	6	1	..	..	..	..	..	3	2	2	1	..	..	..	..	..

Table 3—continued.

[illegible]

TABLE 4.

Deaths in Sanitary Districts from the seven chief causes, 1957.

DISTRICT	Cancer.		Heart disease.		Respiratory non-tuberculosis.		Tuber- culosis- Pulmonary.		Other Tuberculosis		Other circulatory disease.		Vascu- lar lesions of nervous system	
	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.
A.—URBAN.														
1. Eston	53	1.52	99	2.84	38	1.09	2	.06	..	..	23	.66	50	1.0
2. Guisborough	13	1.35	42	4.36	4	.42	..	..	..	..	3	.31	18	1.0
3. Loftus	21	2.74	31	4.05	8	1.04	..	..	..	..	3	.39	15	1.0
4. Malton	7	1.68	15	3.61	2	.48	..	..	..	..	2	.48	14	3.0
5. Northallerton	16	2.60	27	4.38	1	.16	..	..	..	..	2	.32	10	1.0
6. Pickering	3	.71	31	7.38	3	.71	1	.24	..	..	3	.71	10	2.0
7. Redcar	54	1.91	116	4.10	18	.64	2	.07	..	..	14	.49	50	1.0
8. Richmond	14	2.32	18	2.98	6	.99	..	..	..	..	3	.50	11	1.0
9. Saltburn and Marske	12	1.25	42	4.39	7	.73	..	..	..	..	2	.21	13	1.0
10. Scalby	15	2.32	44	6.80	3	.46	..	..	..	..	2	.31	20	3.0
11. Scarborough	101	2.32	293	6.73	51	1.17	3	.07	..	..	14	.32	102	2.0
12. Skelton & Brotton	34	2.65	57	4.45	15	1.17	1	.08	..	..	6	.47	20	1.0
13. Thornaby-on-Tees	45	1.89	62	2.59	20	.84	2	.08	..	..	8	.33	26	1.0
14. Whitby	33	2.87	84	7.32	9	.78	1	.09	2	.17	5	.44	32	2.0
Total Urban	421	2.02	961	4.60	185	.89	12	.06	2	.01	90	.43	391	1.0
B.—Rural.														
1. Aysgarth	9	2.65	26	7.67	1	.29	..	..	1	.29	2	.59	12	3.0
2. Bedale	13	1.55	31	3.69	6	.72	1	.12	..	..	4	.48	18	2.0
3. Croft	2	.86	10	4.31	1	.43	1	.43	..	..	1	.43	4	1.0
4. Easingwold	18	1.56	35	3.03	6	.52	..	..	1	.09	1	.09	12	1.0
5. Flaxton	36	1.56	121	5.25	19	.83	4	.17	1	.04	15	.65	18	..
6. Helmsley	10	1.87	19	3.54	3	.56	1	.19	..	..	1	.19	11	2.0
7. Kirkbymoorside	7	1.42	23	4.67	6	1.22	..	..	..	..	4	.81	10	2.0
8. Leyburn	9	1.41	23	3.61	3	.47	..	..	..	..	4	.63	15	2.0
9. Malton	9	1.62	16	2.88	3	.54	..	..	..	..	2	.36	11	1.0
10. Masham	3	1.84	11	6.75	1	.61	..	..	..	..	2	1.23	5	3.0
11. Northallerton	6	.70	36	4.17	5	.58	..	..	..	..	4	.46	18	2.0
12. Pickering	7	1.38	23	4.52	6	1.18	..	..	..	..	8	1.57	12	2.0
13. Reeth	3	1.52	10	5.08	1	.51	..	..	..	..	1	.51	2	1.0
14. Richmond	38	1.38	47	1.70	16	.58	5	.18	..	..	5	.18	24	..
15. Scarborough	12	1.57	38	4.98	3	.39	..	..	..	..	13	1.70	14	1.0
16. Startforth	10	1.95	17	3.32	1	.20	..	..	..	..	4	.78	4	..
17. Stokesley	38	1.93	68	3.46	14	.71	..	..	..	..	10	.51	27	1.0
18. Thirsk	21	1.49	67	4.76	3	.21	1	.07	..	..	4	.28	25	1.0
19. Wath	8	2.09	3	.78	5	1.31	..	..	..	..	..	..	..	..
20. Whitby	23	1.98	68	5.84	17	1.46	1	.09	..	..	4	.34	31	2.0
Total Rural	282	1.59	692	3.89	120	.67	14	.08	3	.02	89	.50	273	1.0
Administrative County	703	1.82	1653	4.28	305	.79	26	.07	5	.01	179	.46	664	1.0

TABLE 5.

Number of Deaths from certain Diseases in each District during 1957.

DISTRICT.	Pulmonary tuberculosis.				Other tuberculosis.				All tuberculosis.				Influenza.		Bronchitis and other respiratory diseases.	
	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.
A.—URBAN.																
1. Eston ..	25	2	1250.0	.06	5	..	..	..	30	2	1500.0	.06	6	.17	23	.66
2. Guisborough ..	2	..	..	..	1	..	..	..	3	..	..	..	1	.10	3	.31
3. Loftus ..	1	..	..	..	..	..	..	..	1	..	..	..	2	.26	4	.52
4. Malton ..	..	..	..	..	..	..	..	..	..	..	..	..	3	.72	1	.24
5. Northallerton ..	5	..	..	..	..	..	..	..	5	..	..	..	..	..	..	..
6. Pickering ..	..	1	..	.24	..	..	..	..	..	1	..	.24	1	.24	3	.71
7. Redcar ..	20	2	1000.0	.07	2	..	..	..	22	2	1100.0	.07	4	.14	10	.35
8. Richmond ..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	3	.50
9. Saltburn and Marske ..	5	..	..	..	..	..	..	..	5	..	..	..	..	..	2	.21
10. Scalby ..	..	..	..	..	..	..	..	..	..	..	..	..	1	.15	2	.31
11. Scarborough ..	9	3	300.0	.07	..	..	..	..	9	3	300.0	.07	12	.28	31	.71
12. Skelton and Brotton ..	9	1	900.0	.08	..	..	..	..	9	1	900.0	.08	2	.16	9	.70
13. Thornaby-on-Tees ..	14	2	700.0	.08	1	..	..	..	15	2	750.0	.08	1	.04	9	.38
14. Whitby ..	7	1	700.0	.09	3	2	150.0	.17	10	3	333.3	.26	2	.17	7	.61
Total Urban ..	99	12	825.0	.06	12	2	600.0	.01	111	14	792.9	.07	35	.17	107	.51
B.—RURAL.																
1. Aysgarth ..	..	..	..	..	..	1	..	.29	..	1	..	.29	..	..	1	.29
2. Bedale ..	2	1	200.0	.12	..	..	..	..	2	1	200.0	.12	1	.12	4	.48
3. Croft ..	4	1	400.0	.43	..	..	..	..	4	1	400.0	.43	..	..	1	.43
4. Easingwold ..	3	..	..	..	..	1	..	.09	3	1	300.0	.09	2	.17	2	.17
5. Flaxton ..	8	4	200.0	.17	1	1	100.0	.04	9	5	180.0	.22	6	.26	9	.39
6. Helmsley ..	1	1	100.0	.19	2	..	..	..	3	1	300.0	.19	..	..	2	.37
7. Kirkbymoorside ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	5	1.01
8. Leyburn ..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	2	.31
9. Malton ..	1	..	..	..	..	..	..	..	1	..	..	..	1	.18	..	..
10. Masham ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	.61
11. Northallerton ..	3	..	..	..	..	..	..	..	3	..	..	..	..	..	4	.46
12. Pickering ..	2	..	..	..	1	..	..	..	3	..	..	..	1	.20	5	.98
13. Reeth ..	..	..	..	..	..	..	..	..	..	..	..	..	1	.51	1	.51
14. Richmond ..	13	5	260.0	.18	..	..	..	..	13	5	260.0	.18	4	.14	5	.18
15. Scarborough ..	3	..	..	..	..	..	..	..	3	..	..	..	..	..	2	.26
16. Startforth ..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	1	.20
17. Stokesley ..	7	..	..	..	1	..	..	..	7	..	..	..	4	.20	7	.36
18. Thirsk ..	3	1	300.0	.07	..	..	..	..	3	1	300.0	.07	1	.07	2	.14
19. Wath ..	3	..	..	..	..	..	..	..	3	..	..	..	..	..	2	.52
20. Whitby ..	2	1	200.0	.09	1	..	..	..	3	1	300.0	.09	1	.09	12	1.03
Total Rural ..	57	14	407.1	.08	7	3	250.0	.02	64	17	376.5	.10	22	.12	68	.38
Administrative County ..	156	26	600.0	.07	19	5	380.0	.01	175	31	564.5	.08	57	.15	175	.45

TABLE 6.

Number of Deaths from certain Diseases in each District during 1957

DISTRICT	Pregnancy, childbirth, abortion.		Congenital malformations.	
	Deaths	Death-rate per 1,000 births.	Deaths	Death-rate per 1,000 births.
A.—URBAN.				
1. Eston	10	11.93
2. Guisborough	3	15.15
3. Loftus
4. Malton
5. Northallerton
6. Pickering	1	16.67
7. Redcar	1	2.16	2	4.32
8. Richmond	1	8.00
9. Saltburn and Marske	1	5.43
10. Scalby	1	14.93
11. Scarborough	2	3.54
12. Skelton and Brotton	1	4.90	..	..
13. Thornaby-on-Tees	3	5.92
14. Whitby	1	5.13	2	10.26
Total Urban	3	.81	26	7.05
B.—RURAL.				
1. Aysgarth
2. Bedale
3. Croft
4. Easingwold	2	11.98
5. Flaxton
6. Helmsley
7. Kirkbymoorside
8. Leyburn	1	11.24
9. Malton	1	12.50
10. Masham
11. Northallerton	2	14.18
12. Pickering
13. Reeth
14. Richmond	2	4.38
15. Scarborough
16. Startforth
17. Stokesley	1	2.75
18. Thirsk	1	4.83
19. Wath	1	15.38
20. Whitby
Total Rural	11	4.06
Administrative County	3	.47	37	5.78

TABLE 7.

Notification of Infectious Disease in 1957, as given in the weekly returns rendered by Medical Officers of Health.

DISTRICT.		Smallpox.	Scarlet fever.	Diphtheria.	Enteric Fever, includes typhoid & paratyphoid.	Acute Pneumonia.	Cholera.	Plague.	Meningococcal Infection.	Acute poliomyelitis.		Acute encephalitis.	Food poisoning.	Dysentery.	Ophthalmia neonatorum.	Erysipelas.	Malaria (at home).	Malaria (abroad).	Chickenpox.	Measles (excluding Rubella)	Whooping cough.	Puerperal pyrexia.	Tuberculosis		
										Paralytic	Non-paralytic												Respiratory	Meninges & C.N.S.	Other
A.—URBAN.																									
1. Eston ..	..	46	..	..	8	..	..	2	2	2	..	..	3	20	..	1	..	..	..	199	14	2	25	..	5
2. Guisborough ..	..	2	..	..	4	..	..	..	1	..	..	..	..	..	..	..	..	..	..	109	7	2	2	..	1
3. Loftus ..	..	1	..	..	13	..	..	..	..	..	..	..	..	..	..	..	..	1	..	6	..	1	1	..	..
4. Malton ..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	178	1	..	..	..	..
5. Northallerton ..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	50	3	..	5	..	..
6. Pickering ..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	212	..	..	..	..	..
7. Redcar ..	..	24	..	..	25	..	..	..	..	1	..	1	2	2	..	..	..	1	..	485	25	..	20	..	2
8. Richmond ..	..	16	..	..	..	..	..	..	..	..	..	..	3	1	..	..	..	..	..	116	34	..	2	..	..
9. Saltburn & Marske ..	..	..	..	..	3	..	..	1	1	..	..	..	..	..	1	..	..	..	..	72	13	3	5	..	..
0. Scalby ..	..	2	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	36	..	..	..	..	..
1. Scarborough ..	..	15	..	1	18	..	..	..	1	..	..	..	5	..	..	1	..	..	..	271	50	9	9	..	..
2. Skelton & Brotton ..	..	..	..	..	18	..	..	..	..	..	..	..	1	..	..	1	..	..	..	51	24	..	9	..	..
3. Thornaby-on-Tees ..	..	24	3	..	18	..	..	..	2	1	1	1	..	2	..	1	..	1	..	38	11	2	14	..	1
4. Whitby ..	..	4	..	..	8	..	..	..	1	..	..	..	41	..	..	..	..	..	..	130	6	3	7	..	3
Total Urban ..	..	134	3	1	120	..	..	3	10	4	1	2	55	25	1	4	..	3	..	1953	188	22	99	..	12
1956 ..	..	176	..	3	79	..	..	7	8	15	..	1	19	62	3	17	..	..	3	1994	523	29	135	4	5
B.—RURAL.																									
1. Aysgarth ..	..	..	..	..	5	..	..	1	..	..	..	..	..	..	1	..	..	..	..	77	22	1	..	..	..
2. Bedale ..	..	3	..	..	28	..	..	..	..	..	..	..	..	..	1	..	..	..	..	140	20	..	2	..	..
3. Croft ..	..	..	..	..	1	..	..	..	..	..	..	..	..	5	..	..	..	..	..	52	6	..	4	..	..
4. Easingwold ..	..	7	..	..	10	..	..	..	..	..	..	..	..	46	..	..	..	..	..	114	..	..	3	..	..
5. Flaxton ..	..	9	..	..	7	..	..	..	..	..	..	1	13	..	1	..	..	..	..	339	11	1	8	..	1
6. Helmsley ..	..	7	..	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	46	..	..	1	..	2
7. Kirkbymoorside ..	..	2	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	16	..	..	..	..	..
8. Leyburn ..	..	..	..	..	10	..	..	..	..	..	..	1	..	..	..	..	..	..	..	234	9	..	2	..	..
9. Malton ..	..	2	..	..	1	..	..	1	1	..	..	..	..	..	..	..	..	..	..	178	..	..	1	..	..
0. Masham ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..
1. Northallerton ..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	74	24	..	3	..	..
2. Pickering ..	..	1	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	177	1	..	2	..	1
3. Reeth ..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	2	..	..	..	..	83	1	..	..	..	..
4. Richmond ..	..	6	..	..	21	..	..	..	..	..	1	1	13	..	..	..	4	5	..	486	91	1	13	..	..
5. Scarborough ..	..	1	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	123	5	..	3	..	..
6. Startforth ..	..	..	..	..	..	..	..	..	..	..	..	..	5	..	..	..	..	2	..	83	2	..	..	..	1
7. Stokesley ..	..	23	..	..	37	..	..	3	..	..	1	1	1	..	1	..	..	82	195	54	1	7	1	..	..
8. Thirsk ..	..	18	..	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	25	4	..	3	..	..
9. Wath ..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	50	1	..	3	..	..
0. Whitby ..	..	2	..	..	7	..	..	..	..	..	..	1	..	..	1	..	..	..	..	247	7	..	2	..	1
Total Rural ..	..	81	..	..	140	..	..	2	4	..	2	5	87	..	7	..	4	89	2741	258	4	57	1	6	..
1956 ..	..	87	..	1	84	..	..	4	11	9	..	28	9	1	10	..	..	129	443	494	4	57	1	12	..
Administrative County																									
1956 ..	..	215	3	1	260	..	..	5	14	4	1	4	60	112	1	11	..	7	89	4694	446	26	156	1	18
1956 ..	..	263	..	4	163	..	..	11	19	24	..	1	47	71	4	27	..	..	132	2437	1017	33	192	5	17

TABLE 8.

Number of Deaths from Infectious Diseases in each District during 1957.

DISTRICT.	Diph- theria.		Measles.		Whooping cough.		Pneu- monia	
	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths	Death-rate per 1,000 population.
A.—URBAN.								
1. Eston	15	·43
2. Guisborough	1	·10
3. Loftus	4	·52
4. Malton	1	·24
5. Northallerton	1	·16
6. Pickering
7. Redcar	8	·28
8. Richmond	3	·50
9. Saltburn and Marske	5	·52
10. Scalby	1	·15
11. Scarborough	20	·46
12. Skelton and Brotton	6	·47
13. Thornaby-on-Tees ..	1	·04	..	..	..	..	11	·46
14. Whitby	2	·17
Total Urban ..	1	·005	..	..	..	..	78	·37
B.—RURAL.								
1. Aysgarth
2. Bedale	1	·12	..	..	2	·24
3. Croft
4. Easingwold	1	·09	..	..	4	·35
5. Flaxton	10	·43
6. Helmsley	1	·19
7. Kirkbymoorside	1	·20
8. Leyburn	1	·16
9. Malton	3	·54
10. Masham
11. Northallerton	1	·12
12. Pickering	1	·20
13. Reeth
14. Richmond	11	·40
15. Scarborough	1	·13
16. Startforth
17. Stokesley	7	·35
18. Thirsk	1	·07
19. Wath	3	·78
20. Whitby	5	·43
Total Rural	2	·01	..	..	52	·29
Administrative County ..	1	·003	2	·005	..	..	130	·34

TABLE 9.—DEATHS, with their causes, in each District during 1957.

[illegible]

